

Rice Insurance Services Company, LLC

CERTIFICATE OF COVERAGE REAL ESTATE LICENSEE'S ERRORS & OMISSIONS INSURANCE

WILLIAM F. ARBUCKLE JR.
RIVER 2 RIVER PROPERTIES LLC
4194 DICKINSON RD
LAKELAND, LA 70752

I hereby certify that the following licensee is insured as stated below:

Insured: WILLIAM F. ARBUCKLE JR.
License #: 77890
Policy Number: 08 EO 0006LA- / 00568101
Individual Policy Period: 1/1/2008 to 1/1/2009
Policy Limits: \$100,000 per Claim / \$300,000 annual aggregate
Deductible Damages: \$1,000 each Claim
Claims Expenses: \$0 each Claim

Insurance Company: Continental Casualty Company

The policy referenced above is a CLAIMS MADE AND REPORTED POLICY. A Claim must be reported in writing to the Company as soon as possible after the Claim is first made but in no event more than ninety (90) days after the insured became aware of such Claim. The Claim must be made and reported during the policy period or during the Extended Reporting Period in order to qualify for coverage. A Claim is written demand for money or services received by the insured or service of lawsuit or institution of arbitration or mediation proceedings against the Insured, seeking Damages and alleging a negligent act, error or omission in the performance of Professional Services. It is essential, to protect the Insured's interests and to assure that coverage conditions are not violated, that Claims be properly reported. Immediate action required by the real estate licensee and/or broker.

To report a Claim, visit our website www.risceo.com or call our Claims Examiner at our administrative office at (800) 637-7319 for a Notice of Claim form. Complete and submit the Notice of Claim form and other pertinent documents to the Company.

All terms, conditions, deductibles and exclusions are addressed in the policy.

Authorized Representative:



Date: 1/1/2008
Agency: Rice Insurance Services Company, LLC
Address: 4211 Norbourne Blvd, Louisville, KY 40207
Phone: (800) 637-7319
Fax: (502) 897-7174