

OKLAHOMA OWNERS SECURITY VERIFICATION FORM

COMPANY NAME AND ADDRESS COMMERCIAL PERSONAL
COMPANY NAIC NUMBER 18767
Church Mutual Insurance Company
3000 SCHUSTER LANE
MERRILL, WI 54452

POLICY NUMBER 033358009023076
EFFECTIVE DATE 8/1/2019
EXPIRATION DATE 8/1/2020

Fleet Coverage

AGENCY/COMPANY ISSUING FORM (INCLUDE ADDRESS AND TELEPHONE NUMBER)

USI Southwest, Inc.
5151 Belt Line Rd, Suite 200
Dallas, TX 75254 972-737-6200

NAME OF INSURED
Oral Roberts University

COVERAGES: A C D G L N R R1 U S T Z

EXCLUDED DRIVERS

AN OWNER'S LIABILITY INSURANCE POLICY HAS BEEN ISSUED PURSUANT TO THE COMPULSORY INSURANCE LAW OF OKLAHOMA. KEEP A COPY OF THIS OWNERS SECURITY VERIFICATION FORM IN THE MOTOR VEHICLE AT ALL TIMES. SUBMIT A COPY OF THIS OWNERS SECURITY VERIFICATION FORM WITH YOUR APPLICATION FOR REGISTRATION.

SEE IMPORTANT INFORMATION ON REVERSE SIDE

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HOW TO IDENTIFY YOUR COVERAGE

A	LIABILITY (BODILY INJURY/ PROPERTY DAMAGE)	R	CAR RENTAL
C	MEDICAL PAYMENTS	R1	CAR RENTAL AND TRAVEL EXPENSE
D	COMPREHENSIVE	U	UNINSURED MOTOR VEHICLE
G	COLLISION	S	DEATH, DISMEMBERMENT
L	LOSS TO YOUR RECREATIONAL VEH.	T	DISABILITY
N	EMERGENCY ROAD SERVICE	Z	LOSS OF EARNINGS

EXAMINE POLICY EXCLUSIONS CAREFULLY. THIS FORM DOES NOT CONSTITUTE ANY PART OF YOUR INSURANCE POLICY.

OKLAHOMA STATE LAW REQUIRES THAT A COPY OF THIS OWNERS SECURITY VERIFICATION FORM BE CARRIED IN THE MOTOR VEHICLE AT ALL TIMES, AND BE PRODUCED BY ANY DRIVER OF THE VEHICLE UPON REQUEST FOR INSPECTION BY ANY PEACE OFFICER OR REPRESENTATIVE OF THE DEPARTMENT OF PUBLIC SAFETY. IN THE CASE OF AN ACCIDENT, THIS FORM SHALL BE SHOWN UPON REQUEST OF ANY PERSON AFFECTED BY THE ACCIDENT.

OKLAHOMA STATE LAW ALSO REQUIRES THAT A CURRENT COPY OF THIS OWNERS SECURITY VERIFICATION FORM MUST BE SURRENDERED TO THE MOTOR LICENSE AGENT OR OTHER REGISTERING AGENCY UPON APPLICATION OR RENEWAL FOR A MOTOR VEHICLE LICENSE PLATE.

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