OKLAHOMA OWNERS SECURITY VERIFICATION FORM		
COMPANY NAIC NUMBER 25658	COMPANY NAME AND ADDRES Travelers Indemnity Comp One Tower Square Hartford, CT 06183	
POLICY NUMBER	,	EFFECTIVE DATE EXPIRATION DATE
810 7E956752		8/1/2018 8/1/2019
Fleet Coverage		
AGENCY/COMPANY ISSUING FORM (INCLUDE ADDRESS AND TELEPHONE NUMBER) USI Insurance Services National, Inc. 5151 Belt Line Road, 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		

HOW TO IDENTIFY YOUR COVERAGE

A LIABILITY (BODILY INJURY)

PROPERTY DAMAGE)

MEDICAL PAYMENTS COMPREHENSIVE

G COLLISION

LOSS TO YOUR RECREATIONAL VEH EMERGENCY ROAD SERVICE

R1 CAR RENTAL AND TRAVEL EXPENSE

U UNINSURED MOTOR VEHICLE

DEATH, DISMEMBERMENT

DISABILITY

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,

ACORD 50 OK (2009/08)

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