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AGREEMENT FOR TITLE EXAMINATION SERVICES
(Yamhill County and Tigor Title Company of Oregon)

THIS AGREEMENT ("Agreement") is made effective as of the last date set forth adjacent to the signatures of the parties below and is by and between Yamhill County, a political subdivision of the State of Oregon, acting by and through its Department of Assessment and Taxation ("COUNTY") and Tigor Title Company of Oregon, an Oregon corporation, doing business in Oregon as Tigor Title, McMinnville Oregon 97128, Tax Identification Number 95-0567838, ("CONTRACTOR") for the purpose of stating the respective obligations of the parties for CONTRACTOR to examine titles to real properties held after tax foreclosure by the COUNTY Tax Collector.

RECITALS:

A. Chapter 312 of Oregon Revised Statutes establishes the tax foreclosure process. The COUNTY Tax Collector institutes tax foreclosure proceedings against real property after ad valorem property taxes have been delinquent for three years. After the court issues a judgment of tax foreclosure against the real property, the COUNTY Tax Collector holds title to the property for at least two years. During this two year period, the foreclosed property is subject to redemption by certain persons or entities. Redemption is allowed upon payment in full of back taxes, interest and penalties. Upon redemption, all of the COUNTY'S claims to the foreclosed real property are released. If not redeemed within two years after foreclosure, the COUNTY Tax Collector may convey the real property to the COUNTY to become "surplus county real property" which may be sold in accordance with Chapter 275 of Oregon Revised Statutes.

B. ORS 312.125 requires the COUNTY Tax Collector to give notice of the expiration of the two year redemption period to certain persons and entities specified by statute. The notice must be given at least one year before the redemption period expires. This agreement provides for the CONTRACTOR to examine title to tax foreclosed properties to assure the COUNTY Tax Collector that notice requirements imposed by ORS 312.125 have been met.

C. This agreement is based on the requirements of ORS 312.120 through 312.125 and is authorized by ORS 203.010(3). NOW, THEREFORE,

B.O. 14-495

Agreement. In exchange for the mutual promises and consideration stated below, COUNTY and CONTRACTOR agree as follows:

1. **Scope of Work.** CONTRACTOR shall furnish, except as otherwise provided, at its own cost and expense, all labor and services, work and material for completion of the following project: An examination of titles to real properties held after tax foreclosure by the COUNTY Tax Collector in order for the COUNTY Tax Collector to comply with statutory requirements in ORS 312.125. CONTRACTOR shall perform the work in strict accordance with the specifications contained in Exhibit "A" which is incorporated into this Agreement by reference. CONTRACTOR shall properly execute all work described in Exhibit "A" and shall furnish everything necessary for the proper and complete execution of the work.

2. **Time of Completion.** CONTRACTOR shall commence work as requested by the County Tax Collector upon execution of this Agreement and the initial work shall be completed as agreed between the parties but in no event later than _____, 2016. Additional work requests with separate completion dates may follow. An extension of the time specified for completion will be made if changes in the work required occur or if work is suspended, or when the work of CONTRACTOR is delayed on account of conditions which could not have been foreseen or which are beyond the reasonable control of CONTRACTOR and are not the result of its fault or negligence. An extension of time shall also be allowed for delays in progress of the work caused by COUNTY or its employees.

3. **Workers' Compensation Insurance.** CONTRACTOR, its subcontractors, if any, and all employers working under this agreement are subject employers under the Oregon Workers' Compensation Law and shall comply with ORS 656.017, which requires them to provide workers' compensation coverage for all their subject workers.

4. **Incorporation of Public Contracting Provisions Required by Oregon Law; Duty to Comply with Laws.** COUNTY and CONTRACTOR agree to comply with the rules and regulations of COUNTY and applicable state and federal regulations relating to CONTRACTOR'S performance of services under this Agreement, including but not limited to the requirements of ORS 279B.200 through 279B.240 and Article XI, Section 10, of the Oregon Constitution, which are incorporated into this Agreement by reference.

5. Compensation. COUNTY shall pay as full compensation for everything done by CONTRACTOR under this Agreement the sum of \$200.00 for each real property title examined under this Agreement. Payment shall be made by COUNTY upon review and approval of the COUNTY Tax Collector within 15 days of receipt of a written billing. The maximum not-to-exceed amount under this Agreement is \$7,000.00, unless otherwise amended in a writing signed by both parties.

6. Duration and Termination.

a. This Agreement shall remain in effect from the effective date through February 28, 2016 unless extended or terminated as described in this section.

b. This Agreement may be terminated by either party upon the delivery of 30 days written notice of termination to the other party. CONTRACTOR shall not incur any expenses for services provided under this Agreement following COUNTY's notice of termination. Termination shall not effect obligations that exist prior to notice of termination.

7. Independent Contractor. CONTRACTOR is engaged hereby as an independent contractor, and will be so deemed for purposes of the following:

a. CONTRACTOR will be solely responsible for payment of any federal or state taxes required as a result of this Agreement.

b. This Agreement is not intended to entitle CONTRACTOR to any benefits typically granted to COUNTY employees. Without limitation, but by way of illustration, the benefits which are not intended to be extended by this Agreement to CONTRACTOR are vacation, holiday and sick leave, other leaves with pay, tenure, medical, and dental coverage, life and disability insurance, overtime, Social Security, Workers' Compensation, unemployment compensation, or retirement benefits.

c. CONTRACTOR is an independent contractor for purposes of the Oregon Workers' Compensation law (ORS Chapter 656) and is solely liable for any Workers' Compensation coverage under this Agreement. If CONTRACTOR has the assistance of other persons in the performance of this Agreement, CONTRACTOR will qualify and remain qualified for the term of this Agreement as a carrier-insured employer or a self-insured employer as provided by ORS 656.403 et. seq.

d. The COUNTY and CONTRACTOR entered into this Agreement on the premise that the CONTRACTOR is to exercise own independent judgment in the performance of the Agreement requirements. No instructions on the manner in which the services are to be rendered are given to the CONTRACTOR.

e. Delegation. CONTRACTOR shall not delegate the responsibility for providing services hereunder to any other individual or agency without the express written approval of the COUNTY.

8. **Hold Harmless.** CONTRACTOR agrees to indemnify, save, hold harmless and defend COUNTY, its officer, agents, and employees from and against any and all claims, suits, liabilities, actions, damages, costs, losses and expenses resulting from, arising out of, connected with or related to CONTRACTOR's performance of work and services under this Agreement. CONTRACTOR shall be responsible for any and all injury to any and all persons or property caused directly or indirectly by reason of any and all activities by CONTRACTOR in the performance of this Agreement.

9. **Insurance.**

a. CONTRACTOR, at its expense, shall obtain the following insurance coverage and keep them in effect during the entire term of this Agreement:

(1) Workers' Compensation Insurance in compliance with statutory requirements;

(2). Commercial General Liability Insurance (including contractual liability and completed operations coverage, and coverage for liability resulting from hazardous substances), on an occurrence basis, with not less than \$500,000 per occurrence for bodily injury and property damage liability, with an annual aggregate limit of \$1,000,000;

(3) Professional Liability Insurance, including errors and omissions coverage, with a per occurrence and aggregate limit of not less than \$1,000,000, to protect against all loss suffered by COUNTY or third parties, including financial and consequential loss, caused by error, omission, or negligent acts related to the services provided under the Agreement;

(4) Commercial Automobile Liability Insurance, with a combined single limit, or the equivalent of not less than \$1,000,000 per occurrence, for bodily injury and property damage

with respect to CONTRACTOR's vehicles, whether owned, hired, or non-owned, assigned to, or used by CONTRACTOR in connection with the work and services provided under the Agreement;

The required insurance coverages shall be (i) with insurance companies admitted to do business in the state of Oregon and rated A or better by Best's Insurance Rating, and (ii) acceptable to COUNTY. At COUNTY's request, CONTRACTOR shall furnish COUNTY with certificates of insurance for each of the required insurance coverages. The certificates of insurance shall indicate (a) the types of insurance coverage, (b) the identity of all persons or entities covered, (c) the amounts of insurance coverage, and (d) the period of insurance coverage. Any required insurance coverage shall provide that it may not be canceled except after at least 30 days written notice to COUNTY.

The Commercial General Liability and Commercial Automobile Liability shall (i) name COUNTY, its directors, officers, and employees, as additional insureds, (ii) provide that it is primary insurance with respect to the interests of COUNTY and that any insurance maintained by COUNTY is excess and not contributory, and (iii) include a cross-liability and severability of interest clause and a waiver of subrogation clause.

b. CONTRACTOR, its subcontractors, if any, and all employers working under this Agreement are subject employers under the Oregon Workers' Compensation Law and shall comply with ORS 656.017, which requires them to provide workers' compensation coverage for all their subject workers.

10. **Costs and Attorney Fees.** In the event that either party to this Agreement shall take any action, judicial or otherwise, to enforce or interpret any of the terms of this Agreement, each party shall be wholly responsible for its own expenses which it may reasonably incur in taking such action, including costs and attorney fees, whether incurred in a suit or action or appeal from a judgment or decree therein or in connection with any nonjudicial action.

11. **Entire Agreement.** This Agreement is the entire agreement between the parties, and no statements, promises, or inducements made by either party or agent of either party that are not contained in this written Agreement shall be valid or binding. No alterations, changes or additions to this Agreement shall be made except in a written document signed by both CONTRACTOR and COUNTY.

12. **Governing Law; Venue.** This Agreement, and any disputes arising out of or related hereto, shall be governed exclusively by the internal laws of the State of Oregon without regard to its conflicts of laws rules. Any claim, action, suit or proceeding between COUNTY and CONTRACTOR that arises from or relates to this Agreement shall be brought and conducted solely and exclusively within the Circuit Court of Oregon for Yamhill County. CONTRACTOR HEREBY CONSENTS TO THE IN PERSONAM JURISDICTION OF THESE COURTS AND WAIVES ANY OBJECTION TO VENUE IN THESE COURTS AND ANY CLAIM THAT THIS FORUM IS AN INCONVENIENT FORUM.

13. **Counterparts.** This Agreement may be executed by facsimile and in counterparts, which taken together shall form one legal instrument.

14. **Waiver and Cumulative Remedies.** No failure or delay by either party in exercising any right under this Agreement shall constitute a waiver of that right. Other than as expressly stated herein, the remedies provided herein are in addition to, and not exclusive of, any other remedies of a party at law or in equity.

DATED the last date set forth adjacent to the signatures of the parties below.

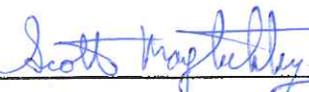
TICOR TITLE COMPANY OF OREGON

By: 
Print name: PETER HARRIS
Date: 7/27/2014

Tax Identification No. 93-0567878

YAMHILL COUNTY, OREGON

By: 
ALLEN SPRINGER, Chair
Board of Commissioners
Date: 8-14-14

By: 
SCOTT MAYTUBBY,
Assessor and Tax Collector
Date: 8-18-14

APPROVED AS TO FORM
By: 
CHRISTIAN BOENISCH
County Counsel

AGREEMENT FOR TITLE EXAMINATION SERVICES

Ticor Title (2014) Page 6

Accepted by Yamhill County
Board of Commissioners on
8-14-14 by Board Order
14-495

EXHIBIT "A"
Agreement for Title Examination Services
SPECIFICATIONS

General Provisions.

- A. Work under this Agreement. Work under this Agreement shall include all labor and materials required to complete this project as described in the "Scope of Work," below. Work under this Agreement shall be completed in a thorough manner and shall accurately reflect information available in the public records specified below.
- B. Applicable statutes. All references to ORS are to currently applicable Oregon Revised Statutes.
- C. Time for completion. The title examinations described in these specifications must be completed by the time required in the Agreement.

Scope of Work.

A. Introduction.

In 1987, the Oregon legislature enacted legislation requiring counties to give one year advance notice to persons and entities with an interest in tax foreclosed properties before the expiration of the period allowed for redemption of property. Among other recipients, the notice must go to lienholders. The legislation is codified as ORS 312.125.

This Agreement requires the CONTRACTOR to examine title to tax foreclosed properties which have not yet been deeded by the County Tax Collector to the COUNTY so that the COUNTY Tax Collector can comply with the notice requirements in ORS 312.125. The COUNTY Tax

Collector will use information obtained and provided by the CONTRACTOR to prepare adequate notice of expiration of redemption rights and determine who should receive the notice.

B. Information required by ORS 312.125.

For each account provided by the COUNTY Tax Collector by tax lot number, the CONTRACTOR shall provide all of the following information in individual reports identified by tax lot number:

1. Names and addresses of any person or entity entitled to redeem the property under ORS 312.120(2) "whose interest appears in the records of the county as of the date the foreclosure proceedings were instituted."

a. Persons entitled to redeem: "...[A]ny person having an interest in the property at the date of the judgment of foreclosure, or any heir or devisee of such person, or any person holding a lien of record on the property, or any municipal corporation having a lien on the property...". ORS 312.120(2).

b. Notice not required to be given to the following: "Any person or entity whose interest has terminated by any means other than a judgment of foreclosure under ORS 312.120 shall not be entitled to such notice." ORS 312.125(1).

c. Addresses:

i. Owners: "...the notice shall be addressed to the owner or owners, as reflected in the county records of deeds, at the true and correct address of the owner as appearing on the instrument of conveyance under ORS 93.260 or as furnished under ORS 311.555 or as otherwise ascertained by the tax collector pursuant to ORS 311.560." ORS 312.125(4)(a).

ii. Lienholders or persons/entities other than owners who are entitled to

redeem: "...the notice shall be addressed to the lienholder, person or entity at the address which the tax collector knows or after reasonable inquiry, has reason to believe to be the address at which the lienholder, person or entity will be most likely to receive actual notice." ORS 312.125(4)(b).

d. "Records of the county" (ORS 312.125(7)):

- i. Grantor-grantee indexes.
- ii. Other records of deeds, mortgages, powers of attorney, contracts and other instruments, documents or memorandum of conveyance or otherwise of real property that are described in ORS 205.130(1) and (2).
- iii. County Clerk Lien Record described in ORS 205.130(3).
- iv. Records of federal tax liens and other liens, instruments or other documents or writings reflecting an interest in real property described in ORS 205.246, if those records are kept separately from the records described in subsection (ii), above.
- v. Records of statutory liens on real property described in ORS 87.372.
- vi. Any other records of interests in real property required to be kept by the county clerk, if the records contain a legal description of the property and an address specifically designated as indicated on the instrument, document or other memorandum or writing for purposes of mailing the notice required by ORS 312.125.
- vii. The appropriate records of the following courts in the custody of the clerk of the appropriate court or the court administrator: Circuit, Court of Appeals, Supreme Court.

viii. Probate records in the custody of the clerk of the appropriate court or court administrator.

2. Date of the judgment and decree of tax foreclosure.

3. A legal description of the property.

4. The name of the owner as it appears on the latest tax roll.

Form **W-9**
(Rev. August 2013)
Department of the Treasury
Internal Revenue Service

**Request for Taxpayer
Identification Number and Certification**

Give Form to the
requester. Do not
send to the IRS.

Name (as shown on your income tax return)

Business name/disregarded entity name, if different from above
Ticor Title Company

Check appropriate box for federal tax classification:
 Individual/sole proprietor C Corporation S Corporation Partnership Trust/estate
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____
 Other (see instructions) ▶ _____

Exemptions (see instructions):
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____

Address (number, street, and apt. or suite no.)
222 High Street
City, state, and ZIP code
Salem, OR 97301

Requester's name and address (optional)

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number									
			-						
Employer identification number									
9	3	-	0	5	6	7	8	3	8

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below), and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person *[Signature]* Date *01/02/2014*

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. The IRS has created a page on IRS.gov for information about Form W-9, at www.irs.gov/w9. Information about any future developments affecting Form W-9 (such as legislation enacted after we release it) will be posted on that page.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, payments made to you in settlement of payment card and third party network transactions, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the

withholding tax on foreign partners' share of effectively connected income, and

- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

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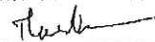
 CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY) 1/5/2014
THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.		
IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).		
PRODUCER Willis Insurance Services of Georgia Inc Concourse Corporate Center Five 18 th Floor Atlanta GA 30328	CONTACT NAME: W Fleenor PHONE (A/C, No, Ext): 813-490-6843 E-MAIL ADDRESS: wendy.fleenor@willis.com PRODUCER CUSTOMER ID #	FAX (A/C, No) INSURER(S) AFFORDING COVERAGE NAIC#
INSURED Ticor Title Company of Oregon and its Subsidiaries Corporate Risk Management Department 601 Riverside Avenue, Bldg 5 Jacksonville, FL 32204	INSURER A : Indian Harbor Insurance Co (XL) INSURER B : Lloyds INSURER C : INSURER D : INSURER E : INSURER F :	36940 15792

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						EACH OCCURRENCE \$ DAMAGES TO RENTED PREMISES(Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS-COMP/PROP AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY(Per person) \$ BODILY INJURY(Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DEDUCTIBLE RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A B	OTHER Errors & Omissions/Cyber Risk Fidelity Bond/Computer Crime Policy			ELU13261314 W131B9130201	1/2/2014 1/2/2014	1/2/2015 1/2/2015	Limit Per Claim - \$10M / Annual Agg - \$10M Limit Per Claim - \$25M / Annual Agg - \$50M

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Evidence of E&O and Crime Insurance for all locations and operations of Ticor Title Company of Oregon and its subsidiaries anywhere in the world. E&O includes Professional and Technology Liability and Cyber Risk Coverage

CERTIFICATE HOLDER	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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