



Policy No. PRS1159094

Item 1. Name of Insured: Charles T. McAlpin

Principal Address: 326 Denver Place, SW
Decatur, AL 35603

Item 2. Policy Period: This policy applies only to negligent acts, errors or omissions which occur during the policy period and then only if claim, suit or other action arising therefrom is commenced during the policy period or within the applicable Statute of Limitations pertaining to the insured. The policy period commences on the effective date hereof and terminates upon the expiration of the Insured's commission as a Notary Public. This policy is not valid for more than one commission term.

Item 3: Limits of Liability: The liability of this Company shall not exceed in the aggregate for all claims under this insurance the amount of Ten Thousand Dollars \$10,000.00.

I. INSURING AGREEMENT

RLI Insurance Company (The "Company") will pay on behalf of the Insured, all sums which the Insured shall become obligated to pay by reason of liability for breach of duty while acting as a duly commissioned and sworn Notary Public, claim for which is made against the Insured by reason of any negligent act, error or omission, committed or alleged to have been committed by the Insured, arising out of the performance of notarial service for others in the Insured's capacity as a duly commissioned and sworn Notary Public.

II. SUPPLEMENTAL PAYMENTS

In addition to the applicable Limits of Liability and in accordance with the other provisions of this Policy, the Company will pay costs and expenses paid and incurred in investigating, contesting or settling liability of the Insured in an amount not to exceed one-half of the limit of this Policy with respect to the Insured.

III. EXCLUSIONS

Coverage under this policy does not apply to any dishonest, fraudulent, criminal or malicious act or omission of the Insured.

IV. COINSURANCE

If the Insured has other insurance against a loss covered by this Policy, the Company shall not be liable under this Policy for a greater proportion of such loss, cost and expenses than the Limits of Liability stated in this Policy bears to the total Limits of Liability of all valid and collectible insurance against such loss.

V. CANCELLATION

This Policy may be cancelled by the Company by mailing thirty (30) days written notice to the Insured and may be cancelled by the Insured by surrender thereof to the Company or any of its agents or by mailing to the Company thirty (30) days written notice and this Policy shall be deemed cancelled and the Policy Period terminated upon such return or at the expiration of said thirty (30) days. A pro rata return premium shall be allowed on cancellation.

Effective Date March 22, 2005

Dated this 22nd day of March, 2005

Countersigned

By [Signature]
 Resident Agent

RLI Insurance Company

By [Signature]
 Jonathan E. Michael, President

Address Claims to: RLI Insurance Company, Claims Department, P.O. Box 3967, Peoria, Illinois 61612-3967