



**NORTH DAKOTA INSURANCE RESERVE FUND**

PO BOX 2258  
BISMARCK, ND 58502

Named Member	Agent

**CONFIRMATION OF COVERAGE**

This confirmation of coverage is issued as a matter of information only and confers no rights upon the confirmation of coverage holder. This confirmation of coverage does not amend, extend, or alter the coverage afforded the named member.

This is to certify that the memorandum of coverage listed below has been issued to the named member shown above.

If any memorandum of coverage listed below be cancelled during the coverage period, the North Dakota Insurance Reserve Fund will provide the confirmation of coverage holder a thirty (30) day notice of cancellation.

<i>Coverage</i>	<i>Memorandum Number</i>	<i>Coverage Period</i>	<i>Limit of Liability</i>
<i>Descriptions of operations, locations, autos, or special items:</i>			

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*Descriptions of operations, locations, autos, or special items:*

  
  
  
  
  
  
  
  
  
  


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***Confirmation of Coverage Holder***

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***Authorized Signature***

***Issue Date***