This Declaration page is attached to and forms part of certificate provisions (Form SLC-3 USA).

Previous No. Authority Ref. No. Certificate No.

1 Name and address
of the Assured

2 Effective from to
both days at 12:01 a.m. standard time

3 Insurance is effective with certain Percentage
UNDERWRITERS AT LLOYD'S, LONDON.

4 Amount Coverage Rate Premium

TOTAL

5 Special conditions

6 Service of Suit may be made upon:

Dated

by _____
Correspondent