



**DECLARATIONS**

Claims Made And Reported Policy: This policy is limited to liability only for those CLAIMS THAT ARE FIRST MADE AGAINST THE INSURED AND REPORTED DURING THE POLICY PERIOD OR DURING THE EXTENDED REPORTING PERIOD. No coverage exists for claims first made against the insured prior to the policy period or after the end of the policy period unless, and to the extent, an extended reporting period applies.

POLICY NUMBER: TIAC155361-22

1. NAMED INSURED AND MAILING ADDRESS:

**Lynton O. Hester III**  
817 16th Street  
Alexandria, LA 71301-6810

2. TYPE OF FIRM: Individual

3. POLICY PERIOD: 8/22/2022 to: 8/22/2023 at 12:01 A.M.  
Standard Time at the address of the Named Insured shown above.

4. LIMITS OF LIABILITY AND DEDUCTIBLE:

Limits:	\$1,000,000	Each Claim	/	\$2,000,000	Policy Aggregate
Deductible:	\$2,500	Each Claim	/	\$7,500	Aggregate Each Policy Period

5. FIRST COVERAGE DATE: 8/22/2022 PRIOR ACTS DATE: 8/22/2022

6. PREMIUM: \$1,687.00

7. FORMS ATTACHED AT EFFECTIVE DATE:

- TIAC-1 Abstracters, Title Insurance Agents and Escrow Agents Professional Liability Insurance Policy (05/2015 Ed.)
- TIA001 Prior Acts Limitation Endorsement
- TIA017 Privacy Breach Mitigation Expense Endorsement
- TIA019 Specified Entity/Individual Exclusion Endorsement
- TIA031 Deductible Reduction Endorsement - Escrow Trust Account Verification and Control
- TIA034 Declination of Client Funds Protection Coverage Endorsement
- TIA006 Certificate of Insurance

**NOTICE:** THIS POLICY IS ISSUED BY YOUR RISK RETENTION GROUP. YOUR RISK RETENTION GROUP MAY NOT BE SUBJECT TO ALL OF THE INSURANCE LAWS AND REGULATIONS OF YOUR STATE. STATE INSURANCE GUARANTY FUNDS ARE NOT AVAILABLE FOR YOUR RISK RETENTION GROUP.

Signature of Authorized Representative