

Avemco Insurance Company 8490 Progress Drive, Suite 200 Frederick, Maryland 21701 main 800 638 8440 facsimile 800 863 3338

Thank you for choosing Avemco Insurance Company. We truly appreciate the opportunity to provide you with exceptional service and unmatched stability.

Below are your Policy Identification Cards.

Cut along the dotted line



Avemco Insurance Company 8490 Progress Drive, Suite 200 Frederick, Maryland 21701 main 800 638 8440 facsimile 800 863 3338

Salem Pilots Association Inc.

Policy # 990106444425

Policy Period From 12/18/2021 To 12/18/2022

Cut along the dotted line



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Salem Pilots Association Inc.

Policy # 990106444425

Policy Period From 12/18/2021 To 12/18/2022

NON-COMMERCIAL AIRCRAFT POLICY No. NC-990106444425

Avemco Insurance Company 8490 Progress Drive, Suite 200 Frederick, MD 21701

Phone: 800 638 8440 Fax: 800 863 3338

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| | | | | | | | |

3. Policy Period:

1. Policyholder and Address:

Salem Pilots Association Inc

Attn: Andy Frank PO Box 105

Salem, OR 97308-0405

| 2. | Lien | hold | ler | and | Ad | ldr | ess | : |
|----|------|------|-----|-----|----|-----|-----|---|
|----|------|------|-----|-----|----|-----|-----|---|

4. Aircraft Description: Reg. No.: N1416E

| | Mo. Day Yr. Mo. Day Yr. 12/18/2021 To 12/18/2022 (12:01 A.M. to 12:01 A.M. local time at your at | 19 | ar Make and Moo 78 CESSNA 172N | del B | ased In OR |
|---|--|---|--|---------------------------------|------------|
| 5. Insurance is provided for the coverages for which limits of liability are shown below: | | | | | |
| C | OVERAGES | LIMITS OF LIABIL | PREMIUMS | | |
| A | Bodily Injury (Including Occupants) and Property Damage Liability | \$ 100,000 each person | \$ 1,000,000 property damage | \$ 1,000,000 each accident | \$1,191.00 |
| В | Aircraft Damage (Including I n Flight) Less deductible | \$ 65,000 insured value | \$ 0 not in motion deductible | \$ 0 in motion deductible | \$2,580.00 |
| С | Medical Expenses | \$ 3 | ,000 each <mark>occupant</mark> | | Included |
| Endorsements at time of issue: F232,OR0001,132301,133801 This policy includes these premium credits: Hangar; Claims Free; | | | | | |
| L_ | | ATUES | | OTAL PREMIUM | \$3,771.00 |
| Th A\ | e limits shown are the limits you have selected. 'AILABLE. If you wish to change these limits, ple | OTHER LIMITS ARE ease contact us . | | _ | |
| | | | | TOTAL | \$3,771.00 |

6. Approved Pilot(s): This policy applies when your insured aircraft is in flight, only while being operated by one of the following pilots who holds a currently effective Pilot Certificate (unless a pre-solo student pilot) issued by the FAA:

Continued on back, if applicable

| COUNTERSIGNED: | 10/15/2021 | BY | Marci Syn Verence | |
|----------------|------------|----|------------------------|--|
| | | | (Authorized Signature) | |

NON-COMMERCIAL AIRCRAFT POLICY

No. NC-990106444425

Avemco Insurance Company 8490 Progress Drive, Suite 200

Frederick, MD 21701

Phone: 800 638 8440 Fax: 800 863 3338

Year

CERTS/FORMS

Based In OR

DATA PAGE

3. Policy Period:

1. Policyholder and Address:

Salam Dilata Association Inc.

Mo. Day Yr.

2. Lienholder and Address:

Bank of Locust Grove

4. Aircraft Description: Reg. No.: N1196J

Make and Model

| Salem Pilots Association inc | bank of Locust Grove |
|------------------------------|------------------------|
| Attn: Andy Frank | P.O.Box 219 |
| PO Box 105 | Locust Grove, OK 74352 |
| Salem, OR 97308-0405 | |
| | |

Mo. Day Yr.

| | 12/18/2021 To 12/18/2022 (12:01 A.M. to 12:01 A.M. local time at your a | | 92 AMERICAN AG5B | GENERAL ACFT | CORP |
|----|--|---|--|---------------------------------|------------|
| 5. | Insurance is provided for the coverages for which limits of liability are shown below: | | | | ANNUAL |
| C | OVERAGES | LIMITS OF LIABII | _ITY | | PREMIUMS |
| Α | Bodily Injury (Including Occupants) and Property Damage Liability | \$ 100,000 each person | \$ 1,000,000 property damage | \$ 1,000,000 each accident | \$1,348.00 |
| В | Aircraft Damage (Including In Flight) Less deductible | \$ 74,000 insured value | \$ 0 not in motion deductible | \$ 0 in motion deductible | \$3,343.00 |
| С | Medical Expenses | \$ 3 | ,000 each occupant | | Included |
| 1 | ndorsements at time of issue: F232,OR000° is policy includes these premium credits: H | | | | |
| L | | | | TOTAL PREMIUM | \$4,691.00 |
| Th | e limits shown are the limits you have selected. 'AILABLE. If you wish to change these limits, pl | OTHER LIMITS ARE ease contact us. | | | |
| | | | | TOTAL | \$4,691.00 |

6. Approved Pilot(s): This policy applies when your insured aircraft is in flight, only while being operated by one of the following pilots who holds a currently effective Pilot Certificate (unless a pre-solo student pilot) issued by the FAA:

Continued on back, if applicable

| COUNTERSIGNED: | 10/15/2021 | BY | Marci Lyn Verenee |
|----------------|------------|----|------------------------|
| | | | (Authorized Signature) |