



**EXCESS FINANCIAL PRODUCTS INSURANCE POLICY**

**Policy Number** \_\_\_\_\_

TWIN CITY FIRE INSURANCE COMPANY  
Indianapolis, Indiana

Coverage is provided in the Company shown above.  
The Company is a stock insurance company,  
herein called the Underwriters.

NOTICE: THIS IS A CLAIMS MADE POLICY. EXCEPT AS MAY BE OTHERWISE PROVIDED HEREIN, THE COVERAGE OF THIS POLICY IS LIMITED TO LIABILITY FOR ACTS COVERED BY UNDERLYING INSURANCE (ITEM D.) FOR WHICH CLAIMS ARE FIRST MADE AGAINST THE INSURED(S) WHILE THE POLICY IS IN FORCE. THIS POLICY DOES NOT PROVIDE FOR THE UNDERWRITERS TO DEFEND THE INSURED, AND ANY DEFENSE COSTS AND OTHER CLAIM EXPENSE COVERED UNDER THE POLICY IS PART OF AND NOT IN ADDITION TO THE LIMIT OF LIABILITY. PLEASE READ AND REVIEW THE POLICY CAREFULLY.

**DECLARATIONS**

**ITEM A.** Name of Insured: (hereinafter called the "Insured")

Address of Insured:

SPECIMEN

**ITEM B.** Policy Period: From 12:01 a.m. on \_\_\_\_\_ To 12:01 a.m. on \_\_\_\_\_  
(Standard Time at the address stated in Item A)

**ITEM C. LIMIT OF LIABILITY:** Aggregate each Policy Period, including claim expense.

**ITEM D. SCHEDULE OF UNDERLYING INSURANCE:**

(1) Primary Policy:

Company:

Policy Number:

Limit of Liability:

(2) Underlying Excess Policy(ies):

**ITEM E. ENDORSEMENTS EFFECTIVE AT INCEPTION:**

**ITEM F. TERMINATION OF PRIOR POLICY(IES):**

**ITEM G. DISCOVERY CLAUSE:**

(1) Additional Premium:

(2) Additional Period:

**ITEM H. POLICY PERIOD PREMIUM:**

\_\_\_\_\_  
Authorized Representative

\_\_\_\_\_  
Date