Workers' Compensation Confirmation of Binding

Chartis Aerospace Insurance Services, Inc.

	THE RESIDENCE AND ADDRESS OF THE PARTY OF TH	e madrance dervices, me.	
	R	SB Aviation, Inc. dba Best In Flight	_
PRODUC	RODUCER: Davidson Solid Rock Insurance		
EFFECTIVE DATE: 12/15/12		EXPIRATION DATE: 12/15/	13
TODAYS	B DATE: 12/17/12	1	
All States	: Coverage except Californi	a & Monopolistic	
	NUMBER	WC CONTROL OF THE CON	
COMPANY:		Insurance Company of the State of Pennsylvania	
		S	
	IT TERMS:	Annual	
EMPLOYER LIABILITY LIMITS:		\$1,000,000/\$1,000,000/\$1,000,000	T
LIIII LO 1	EN ENTERIOR STATES		_
California	Only		
	NUMBER	N/A	
COMPA		N/A	
ESTIMATED ANNUAL PREMIUM:			
PAYMENT TERMS:		N/A	
EMPLOYER LIABILITY LIMITS:		N/A	
LIIII LO	ER EMBIEIT I EIMITO.	IVA	
COVER	GE'S (IN STATES PERMI	TTED)	
		MONOPOLISTIC STATES & CALIFORNIA	
	TEO OOVERSIGE ENGL	110/10/02/07/02/07/07/07	
1	Alternate Employer Cov	erage	WC 00 03 01 A
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Benefits Deductible Plan		i l	WC 00 06 03
_			
Designated Workplaces		Exclusion	WC 00 03 02
Г			
1	Employer's Liability Cov	erage (also known as "Stop Gap Coverage")	WC 00 03 03 C
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Г	Foreign Coverage		WC 60904
	Excess Repatriation		
_	The state of the s		
	Longshore and Harbor Workers Act Coverage		WC 00 01 06 A
game.			
1	Maritime Coverage		WC 00 02 01 A
F			
IA	Partners, Officers and C	Others Exclusion	WC 00 03 08