

Insurance Company: C.N.A. Insurance
Policy Type: D&O and Entity Liability
Policy Number: Unknown (please insert policy number)
Policy Term Dates: 5/1/26– 5/1/27

RE: Agent of Record Assignment

To Whom It May Concern:

I, _____, an owner/officer/administrator of Mangum Regional Medical Center, hereby appoint BancFirst Insurance Services, Inc., as my agent/broker of record in regard to the captioned policy. They are hereby authorized to act on my behalf as my agent with your company. This includes my express authorization that you may provide my agent with any information associated with my policy.

I do not wish to assign this policy/quote to any other agent, nor do I wish to wait for the 10-day period to expire for other agents to procure a rescinding letter. Please release the captioned quote/policy to BancFirst Insurance Services, Inc., when completed.

This letter supersedes any other Agent of Record letter and is hereby effective until revoked in writing.

Sincerely,

Owner/Officer/CEO/President