

EXHIBIT C

Certificate of Assumption and Endorsement

Policyholder Name
Address
City, State, Zip

CERTIFICATE OF ASSUMPTION

Eagle Point Mutual Insurance Company of Chippewa Falls, Wisconsin (Eagle Point Mutual) is a party to an agreement between Eagle Point Mutual and Jamestown Mutual Insurance Company of Kieler, Wisconsin (Jamestown Mutual) providing for the assumption by Eagle Point Mutual of all obligations and liabilities under this policy of insurance issued by Jamestown Mutual. By virtue of this agreement, the liabilities, and obligations of Jamestown Mutual under this policy of insurance issued by the company are now directly those of Eagle Point Mutual. All benefits under the policy remain the same.

All premiums now or hereafter due on this policy are payable to Eagle Point Mutual at its home office or executive office or to its duly authorized agents.

IN WITNESS WHEREOF, Eagle Point Mutual Insurance Company has caused this Certificate of Assumption to be executed this

_____ day of _____, _____

Ron Staples
President,
Eagle Point Mutual Insurance Company

**THIS CERTIFICATE FORMS A PART OF YOUR POLICY
AND SHOULD BE ATTACHED THERETO**