M/023/010

Crum&Forster Insurance

STATE OF UTAH, DEPT. OF NATURAL RESOUR
DIVISION OF OIL, GAS AND MINING
355 WEST NORTH TEMPLE, 3 TRIAD CENTER
SALT LAKE CITY, UT 84180-1203

RECEIVED
NOV 25 1994
DIV OF OIL, GAS & MINING

Date: October 28, 1994

Dear Bondholder:

The purpose of this letter is to tell you of some changes we've made and how they affect you.

Our parent company, Talegen Holdings, Inc. ("Talegen"), previously named Crum and Forster, Inc., has recently restructured its subsidiaries into self-contained business units, each of which offers discrete products and services and has its own dedicated insurance companies. The establishment of dedicated companies permits enhanced management focus on the insurance subsidiaries within each business unit. The restructuring of the insurance companies has been approved by the Insurance Departments of all states in which the companies are domiciled.

The insurance subsidiaries dedicated to the Crum & Forster Insurance business unit consist of United States Fire Insurance Company, The North River Insurance Company, Premier Insurance Company, Crum and Forster Insurance Company, Crum & Forster Underwriters Co. of Ohio and Commonwealth Lloyd's Insurance Company, each of which has retained its A- (Excellent) AM Best rating. These companies are staffed by the same personnel who have handled your bond in the past and whose expertise is in underwriting a broad range of fidelity/surety coverages through a select network of independent agents and brokers. Any such coverage previously written in another Talegen insurance company will be transferred to one of the dedicated companies in the Crum & Forster Insurance business unit, so that Crum & Forster Insurance will be a self-contained business unit with a portfolio of bonds and property/casualty policies which directly reflect our book of business.

Since your bond was originally issued in a company which is now assigned to another Talegen business unit, we would like to transfer your bond to one of the companies in the Crum & Forster Insurance business unit, so that all insurance coverage handled by Crum & Forster Insurance is in its own dedicated insurance companies. Accordingly, attached is a Notice and Certificate of Assumption. This is an endorsement that would legally transfer your bond to United States Fire Insurance Company. Please read this Notice and Certificate of Assumption carefully and take the appropriate action indicated.

Please be assured that all your rights as a bondholder, all the terms and conditions of your bond, and the relationship between your agent/broker and those of us at Crum & Forster Insurance who have serviced your account, will not change as a result of this transfer.

We are confident that as a result of the restructuring we are now a stronger business unit, fully focused on meeting the needs of our fidelity/surety bondholders and property/casualty policyholders. If you have any questions or would like additional financial information on the insurance companies, please feel free to contact your agent/broker directly, use our toll free number (800) 899-7991, or call me personally at (201) 490-6601.

Sincerely,

James A. Stark
President
United States Fire Insurance Company

ED STATES FIRE INSURANCE COMP

("ASSUMING REINSURER")

6 Sylvan Way, P.O. Box 437

Parsippany, NJ 07054-9484

1-800-899-7991

NOTICE AND CERTIFICATE OF ASSUMPTION

Issued To:

ASH GROVE CEMENT COMPANY
8900 INDIAN CREEK PARKWAY
SHAWNEE MISSION, KS 66210-0000

Obligee:

STATE OF UTAH, DEPT. OF NATURAL RESOUR
DIVISION OF OIL, GAS AND MINING
SALT LAKE CITY, UT 84180-1203

Bond No.: 610175297

This is to certify that, pursuant to the terms of an Assumption and Indemnity Reinsurance Agreement, effective as of 12:01 a.m. Eastern Standard Time on January 1, 1993, the above bond and all of its riders (the "Bond") issued by Westchester Fire Insurance Company
6 Concourse Parkway Suite #2700 Atlanta, GA 30328
(the "COMPANY") were assumptively reinsured by the ASSUMING REINSURER.

All of the terms and conditions of your Bond remain unchanged, except that the ASSUMING REINSURER shall be your insurer. The ASSUMING REINSURER shall have all of the original rights and obligations of the COMPANY under your Bond.

This change in insurance companies is contingent upon your express affirmative consent, given by sending the attached form to the ASSUMING REINSURER. If you consent to this change, ONLY the ASSUMING REINSURER shall have obligations or be liable to you in the future and the COMPANY shall be released from all future obligations or liability. If you do NOT consent to this change, ONLY the COMPANY shall have obligations or be liable to you in the future and you shall have no rights against the ASSUMING REINSURER.

If you choose to accept the ASSUMING REINSURER as your direct insurer, all premium payments, bond changes, notices, claims and suits or actions on your Bond shall in the future be made directly to the ASSUMING REINSURER as though it had issued the Bond originally. All correspondence and inquiries should be submitted to the ASSUMING REINSURER at the address indicated above.

This Notice and Certificate of Assumption forms a part of and should be attached to the Bond issued to you by the COMPANY.

IN WITNESS WHEREOF, the ASSUMING REINSURER has caused this Notice and Certificate of Assumption to be signed by its duly authorized officers in facsimile to become effective as its original signature.

UNITED STATES FIRE INSURANCE COMPANY

By: James K. Killelea
James K. Killelea
Secretary

By: James A. Stark
James A. Stark
President

FM 0.0.780 (7-93)

Tear-Off Option, Please Retain Top Portion for Your Records and Attach to Your Policy

f you elect to accept or reject the transfer of your Bond from Westchester Fire Insurance Company
o United States Fire Insurance Company complete and return the following:

X Yes, I accept the transfer of my Bond from Westchester Fire Insurance Company to United States Fire Insurance Company.

___ No, I reject the proposed transfer of my Bond from Westchester Fire Insurance Company to United States Fire Insurance Company and wish to retain my Bond with Westchester Fire Insurance Company.

Signature: _____ Date 12/12/94
Title: Director

Name: STATE OF UTAH, DEPT. OF NATURAL RESOUR
Street Address: DIVISION OF OIL, GAS AND MINING
City, State, Zip: SALT LAKE CITY, UT 84180-1203
Bond Number: 610175297

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