FORM-SI-LOC

LETTER OF CREDIT - SAMPLE FORM

Name	of Bank: _		
Name	of Self Ins	surer:	
Irrevo	cable Lett	ter of Credit Number:	
Date:			
Benef	iciary:	Oklahoma Workers' Compensation Commission 1915 N. Stiles Avenue Oklahoma City, OK 73105	
Re:		mer Name it as Security for Self Insured Status	
To:	Oklaho	oma Workers' Compensation Commission	
\$		ave established this Irrevocable Letter of Credit solely in your favor for drawings and expiring at our (bank address	
		withour close of business on	
		ereby undertake to promptly honor your sight draft(s) drawn on us, indicating our Letter of Cre, for all or any part of this Letter of Credit if presented at (bar onor before the expiry date or any automatically extended date	nk address)
	-	t as stated herein, this undertaking is not subject to any condition or qualification. The obligation er of Credit shall be the individual obligation of the Bank, in no way contingent upon reimburs o.	
-	rom the ex	condition of this Letter of Credit that is shall be deemed automatically extended without amendn xpiry date hereof, or any future expiry date, unless sixty (60) days prior to the expiry date we sha ill that we elect not to consider this Letter of Credit renewed for any such additional period.	
contro	of the expi ol, or by an	further condition of this Letter of Credit that any interruption of the Bank's conduct of business value caused by an act of God, riot, civil commotion, insurrection, war or other cause beyond my strike or lockout, will automatically extend the expiry date hereof, as well as future expiry dates tion beginning on the first day after the interruption on which the Bank is open.	d the bank's
•	gal procee	etter of Credit shall be governed by the laws fo Oklahoma and subject to Title 12A O.S. 1991 §5-10 edings are initiated with respect to payment of this Letter of Credit it is agreed that such proceed homa courts and law.	
Bank:			
Addre	ss:		
Autho	rized Sign	nature:	
Title			