REVISED FINAL RESPONSE FORM

FROM:	
TO:	Exportní garanční a pojišťovací společnost, a.s. (EGAP)
We refer to Form dated	o the Agreement between us dated and Revised Final Proposal dated.
	ence number:
_	the revised proposal you have made and will provide the reinsurance you the terms set out in the Agreement dated and Revised Final form dated.
by then. Sh	nitment shall lapse 90 days after the date of this form if you have not issued a policy nould you require an extension period, please send us the correspondent request for due course and explain why extra time is required.
Signed: For:	
Dated:	