



STATE FARM FIRE AND CASUALTY COMPANY  
A STOCK COMPANY WITH HOME OFFICES IN BLOOMINGTON, ILLINOIS

3 Ravinia Drive  
Atlanta GA 30346-2117

**Named Insured**

AT2 002354\_3125 M-20-2293-FAD1 F V

THE PRESERVE HOMEOWNER  
ASSOCIATION INC  
C/O JOE MAZZA BRAY & CO  
637 NORTH AVE  
GRAND JCT CO 81501-7513



**RENEWAL DECLARATIONS**

<b>Policy Number</b>	96-E6-5775-6	
<b>Policy Period</b>	<b>Effective Date</b>	<b>Expiration Date</b>
12 Months	JUN 1 2019	JUN 1 2020
The policy period begins and ends at 12:01 am standard time at the premises location.		

**Agent and Mailing Address**

LAVONNE GORSUCH INS AGCY INC  
501 HIGHWAY 50  
GRAND JCT CO 81503-1907

PHONE: (970) 243-1117

**Residential Community Association Policy**

**Automatic Renewal** - If the policy period is shown as 12 months, this policy will be renewed automatically subject to the premiums, rules and forms in effect for each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

Entity: HOMEOWNERS ASSN

NOTICE: Information concerning changes in your policy language is included. Please call your agent if you have any questions.



POLICY PREMIUM \$ 625.00

Minimum Premium

Discounts Applied:

Renewal Year

Claim Record

Prepared  
APR 03 2019  
CMP-4000

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**RENEWAL DECLARATIONS (CONTINUED)**

Residential Community Association Policy for THE PRESERVE HOMEOWNER  
 Policy Number 96-E6-5775-6

**This Policy does not provide any SECTION I - PROPERTY coverage**

**SECTION II - LOCATION SCHEDULE**

Location Number	Location of Described Premises
001	PRESERVE LN GRAND JCT CO 81503

**SECTION II - LIABILITY**

COVERAGE	LIMIT OF INSURANCE
Coverage L - Business Liability	\$1,000,000
Coverage M - Medical Expenses (Any One Person)	\$5,000
Damage To Premises Rented To You	\$300,000
Directors And Officers Liability	\$1,000,000
AGGREGATE LIMITS	LIMIT OF INSURANCE
Products/Completed Operations Aggregate	\$2,000,000
General Aggregate	\$2,000,000
Directors and Officers Aggregate	\$1,000,000

Each paid claim for Liability Coverage reduces the amount of insurance we provide during the applicable annual period. Please refer to Section II - Liability in the Coverage Form and any attached endorsements.



### RENEWAL DECLARATIONS (CONTINUED)

**Residential Community Association Policy for THE PRESERVE HOMEOWNER**  
**Policy Number 96-E6-5775-6**



Your policy consists of these Declarations, the BUSINESSOWNERS COVERAGE FORM shown below, and any other forms and endorsements that apply, including those shown below as well as those issued subsequent to the issuance of this policy.

#### FORMS AND ENDORSEMENTS

CMP-4100	Businessowners Coverage Form
FE-6999.2	*Terrorism Insurance Cov Notice
CMP-4815	Directors/Officers Endorsement
CMP-4206.1	Amendatory Endorsement
CMP-4788	Addl Insd Mgrs Lessor of Prem
CMP-4550	Residential Community Assoc
CMP-4746.1	Hired Auto Liability
FE-3650	Actual Cash Value Endorsement
CMP-4561.1	Policy Endorsement
	* New Form Attached

#### SCHEDULE OF ADDITIONAL INTERESTS

**Interest Type:** Addl Insured-Section II  
**Endorsement #:** CMP4788  
**Loan Number:** N/A

BRAY & COMPANY PROPERTY  
MANAGEMENT  
637 NORTH AVE  
GRAND JCT CO 815017513

## RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for THE PRESERVE HOMEOWNER  
 Policy Number 96-E6-5775-6

This policy is issued by the State Farm Fire and Casualty Company.

## Participating Policy

You are entitled to participate in a distribution of the earnings of the company as determined by our Board of Directors in accordance with the Company's Articles of Incorporation, as amended.

In Witness Whereof, the State Farm Fire and Casualty Company has caused this policy to be signed by its President and Secretary at Bloomington, Illinois.

*Lynne M. Youell*  
 Secretary

*Michael J. Tignor*  
 President

**NOTICE TO POLICYHOLDER:**

For a comprehensive description of coverages and forms, please refer to your policy.

Policy changes requested before the "Date Prepared", which appear on this notice, are effective on the Renewal Date of the policy unless otherwise indicated by a separate endorsement, binder, or amended declarations. Any coverage forms attached to this notice are also effective on the Renewal Date of this policy.

Policy changes requested after the "Date Prepared" will be sent to you as an amended declarations or as an endorsement to your policy. Billing for any additional premium for such changes will be mailed at a later date.

If, during the past year, you've acquired any valuable property items, made any improvements to insured property, or have any questions about your insurance coverage, contact your State Farm agent.

Please keep this with your policy.

Prepared  
 APR 03 2019  
 CMP-4000

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for THE PRESERVE HOMEOWNER  
Policy Number 96-E6-5775-6



Your coverage amount....

It is up to you to choose the coverage and limits that meet your needs. We recommend that you purchase a coverage limit equal to the estimated replacement cost of your structure. Replacement cost estimates are available from building contractors and replacement cost appraisers, or, your agent can provide an estimate from Xactware, Inc.® using information you provide about your structure. We can accept the type of estimate you choose as long as it provides a reasonable level of detail about your structure. State Farm® does not guarantee that any estimate will be the actual future cost to rebuild your structure. Higher limits are available at higher premiums. Lower limits are also available, as long as the amount of coverage meets our underwriting requirements. We encourage you to periodically review your coverages and limits with your agent and to notify us of any changes or additions to your structure.

0305-ST-1-1001

Prepared  
APR 03 2019  
CMP-4000

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RECEIVED  
FEDERAL BUREAU OF INVESTIGATION  
U.S. DEPARTMENT OF JUSTICE

TO : SAC, NEW YORK  
FROM : SAC, PHOENIX  
SUBJECT: [Illegible]



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## IMPORTANT NOTICE . . . Data Compromise Coverage Now Available



Nearly all businesses collect and retain personal information about their clients, employees and business associates. Yet many businesses lack the resources to respond effectively in the event this data is stolen or released when it is in their care, custody or control.

If a data breach occurs, a business may be required to notify all parties who were affected by the breach, effectively communicate the nature of the loss or disclosure and, if warranted, provide credit monitoring assistance and identity restoration case management service to those affected. Many states already require businesses to provide these services.

Data Compromise coverage may help a business respond to the expense of service obligations following a covered data breach.

### Coverage Summary

Data Compromise coverage is designed to help a business investigate a data breach, notify individuals and provide credit monitoring, case management and other services that help prevent identity theft and fraud following a covered breach of non-public personal information. Data Compromise coverage may be available for certain necessary and reasonable expenses including:

- Legal and forensic information technology reviews;
- Notification to affected individuals; and
- Service to affected individuals including:
  - Informational materials;
  - Toll-free help line;
  - Credit report monitoring; and
  - Identity restoration case management.

If you choose to purchase Data Compromise coverage, Identity Restoration coverage will be included for your business.

No one can predict if a covered data breach will occur, but you are able to protect your business from certain response costs a breach may create. If you are interested in adding Data Compromise coverage to your policy, contact your State Farm® agent to see if your business qualifies.

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