## The Cincinnati Insurance Companies - Claims Online Policyholder Report(COPR)

Insured: HARBOR POINTE FACILITY

Agency: 34091 - BUREN INSURANCE GROUP, INC.

Valid Though Date: 01-02-17 Next Month-End Closing Date: 01-31-17 Last Month-End Closing Date: 12-31-16

Sorted by Date of Loss													
Loc	Policy	Policy Effect	Named Insured	Oc #	Loss Cat Date	Loss Description	Loss Type	Claimant/Payee	Paid	Salv/Subr	Eynense	End Rsv or Month Closed	Incurred
200	HCA0007493		HARBOR POINTE FACILITY		out Duto	NO LOSSES	Туро	olumum, ayoo	1 did	Carvoabi	Ехропос	World Closed	mounted
	HCA0007493	03-01-14	HARBOR POINTE FACILITY			NO LOSSES							
	HCF0007493	05-01-16	HARBOR POINTE FACILITY			NO LOSSES							
	HCF0007493	03-01-16	HARBOR POINTE FACILITY			NO LOSSES							
	HCF0007493	03-01-15	HARBOR POINTE FACILITY			NO LOSSES							
	CPA0894472	03-01-11	HARBOR POINTE FACILITY			NO LOSSES							
	CPP0894472	03-01-12	HARBOR POINTE FACILITY			NO LOSSES							
0000	CPA0894472	03-01-12	HARBOR POINTE FACILITY	1	03-28-12	BACKING/ROLLING BACK	PD	Victoria Hume	2,688	0	0	05/12	2,688
							Tota	I for Loss Date 03-28-12 for Location 0000	2,688	0	0	0	2,688
0000	CPA0894472	03-01-12	HARBOR POINTE FACILITY	1	10-02-12	INSD REARENDING CLMT	PD	Melissa Elaine Robinette	7,329	0	0	11/12	7,329
							Tota	l for Loss Date 10-02-12 for Location 0000	7,329	0	0	0	7,329
						Total for Policy Effective Date 03-01-12 for Location 0000				0	0	0	10,017
							Total	for Policy Symbol CPA for Location 0000	10,017	0	0	0	10,017
0000	CPP0894472	03-01-11	HARBOR POINTE FACILITY	1	10-24-11	OTHER PROFESSIONAL	ВІ	Sheila Davis	0	0	22,070	62,929	85,000
							Tota	I for Loss Date 10-24-11 for Location 0000	0	0	22,070	62,929	85,000
						Total for Policy Effective Date 03-01-11 for Location 0000			0	0	22,070	62,929	85,000
						Total for Policy Symbol CPP for Location 0000			0	0	22,070	62,929	85,000
									10,017	0	22,070	62,929	95,017
0000	Location Descrip	otion Not o	n File										
0000	HCA0007493	03-01-13	HARBOR POINTE FACILITY	1	02-13-14	BACKING/ROLLING BACK	PD	Christian Kendall	0	0	0	05/14	0
							Tota	I for Loss Date 02-13-14 for Location 0000	0	0	0	0	0
					Total for Policy Effective Date 03-01-13 for Location 0000					0	0	0	0
							Total	for Policy Symbol HCA for Location 0000	0	0	0	0	0
0000	HCF0007493	03-01-13	HARBOR POINTE FACILITY	1	02-01-14	OTHER PROFESSIONAL	PROF	Lillian Lane Smith	0	0	0	05/14	0
							Tota	I for Loss Date 02-01-14 for Location 0000	0	0	0	0	0
							•	Effective Date 03-01-13 for Location 0000	0	0	0	0	0
0000	HCF0007493	03-01-14	HARBOR POINTE FACILITY	1	06-03-14	FLOOD/WATER/SPRINKLR		D HARBOR POINTE FACILITY OPERATI	0	0	672	08/14	672
								I for Loss Date 06-03-14 for Location 0000	0	0	672	0	672
						Total fo	or Policy	Effective Date 03-01-14 for Location 0000	0	0	672	0	672

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Loc	Policy	Policy Effect	Named Insured	Oc #	Lo Cat Da	)SS	Loss Description	Loss Type	Claimant/Payee	Paid	Salv/Subr	Evnense	End Rsv or Month Closed	Incurred
Loc	1 Olicy	Lilect	Named Insured	. #	Oat De	210	Loss Description		for Policy Symbol HCF for Location 0000	0	0	672	0	672
									Total for Location 0000	0	0	672	0	672
4001	THE VILLAGE A	T HARBOF	R POINTE - SALISBURY MD											
4001	HCA0007493	03-01-15	HARBOR POINTE FACILITY	1	03	3-16-15	BACKING/ROLLING BACK	PD	LYNDSAY NAVE	671	0	0	05/15	671
							BACKING/ROLLING BACK	COLL	HARBOR POINTE FACILITY OPERATI	519	0	23	05/15	542
								Total	for Loss Date 03-16-15 for Location 4001	1,190	0	23	0	1,213
							Total	Total for Policy Effective Date 03-01-15 for Location 4001			0	23	0	1,213
4001	HCA0007493	05-01-16	HARBOR POINTE FACILITY	1	11	-09-16	PASSING&TURNING ACC	PD	Gearria Repine	3,914	0	0	12/16	3,914
								Total	for Loss Date 11-09-16 for Location 4001	3,914	0	0	0	3,914
							Total for Policy Effective Date 05-01-16 for Location 4001			3,914	0	0	0	3,914
								Total	for Policy Symbol HCA for Location 4001	5,104	0	23	0	5,127
4001	HCF0007493	03-01-14	HARBOR POINTE FACILITY	1	07	7-17-14	FLOOD/WATER/SPRINKLR	WTR AD	HARBOR POINTE FACILITY OPERATI	22,698	0	6,039	04/16	28,737
								Total	for Loss Date 07-17-14 for Location 4001	22,698	0	6,039	0	28,737
							Total for Policy Effective Date 03-01-14 for Location 4001			22,698	0	6,039	0	28,737
							Total for Policy Symbol HCF for Location 4001			22,698	0	6,039	0	28,737
							Total for Location 4001			27,802	0	6,062	0	33,864
4010	REEDERS MEMO	ORIAL HOI	ME - BOONSBORO MD											
4010	HCF0007493	03-01-13	HARBOR POINTE FACILITY	1	01	-02-14	MEDICAL PROFESSIONAL	ВІ	Nancy Sabol	0	0	0	02/16	0
							MEDICAL PROFESSIONAL	PROF	Nancy Sabol	0	0	75	100,000	100,075
								Total	for Loss Date 01-02-14 for Location 4010	0	0	75	100,000	100,075
4010	HCF0007493	03-01-13	HARBOR POINTE FACILITY	1	02	2-01-14	OTHER PROFESSIONAL	PROF	Lillian Smith	850,000	0	31,229	4,770	886,000
								Total	for Loss Date 02-01-14 for Location 4010	850,000	0	31,229	4,770	886,000
	Total for Policy Effective Date 03-01-13 for Location 4010						850,000	0	31,304	104,770	986,075			
4010	HCF0007493	03-01-14	HARBOR POINTE FACILITY	1	D5 02	2-16-15	WEATHER/TEMPERATURE	FREZNO	HARBOR POINTE FACILITY OPERATI	196,903	0	8,413	04/16	205,316
4010	HCF0007493	03-01-14	HARBOR POINTE FACILITY	1	02	2-16-15	WEATHER/TEMPERATURE	FREZNO	HARBOR POINTE FACILITY OPERATI	0	0	0	7,000	7,000
4010	HCF0007493	03-01-14	HARBOR POINTE FACILITY	1	D5 02	2-16-15	WEATHER/TEMPERATURE	FREZNO	HARBOR POINTE FACILITY OPERATI	0	0	0	-7,000	-7,000
								Total	for Loss Date 02-16-15 for Location 4010	196,903	0	8,413	0	205,316
	Total for Policy Effective Date 03-01-14 for Location 4010						196,903	0	8,413	0	205,316			
	Total for Policy Symbol HCF for Location 4010						1,046,903	0	39,717	104,770	1,191,391			

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Sorted by Date of Loss							
Policy Loc Policy Effect Named Insured	Oc Loss # Cat Date Loss Description	Loss Type Claimant/Payee	Paid	Salv/Subr	Expense	End Rsv or Month Closed	Incurred
		Total for Location 4010	1,046,903	0	39,717	104,770	1,191,391
		Report Grand Total	1,084,722	0	68,521	167,699	1,320,944