

ACCOUNT/POLICY 0313467 -02-784136 EFFECTIVE DATES 03/14/15 TO 03/14/16

COVERAGE

CLAIM#	CLMNT#	DATE OF LOSS	REPORTED BY	TITLE	DATE REPORTED	STATUS	TOTAL CLAIM
							.00

LOSS LOCATION	PAID
	.00

LOSS DESCRIPTION	ALLEGED INJURY/DAMAGE
------------------	-----------------------

TOTAL FOR POLICY NUMBER 02-784136 -	.00
TOTAL NUMBER OF CLAIMS	0
TOTAL FOR POLICY NUMBER 02-784136	.00
TOTAL NUMBER OF CLAIMS	0

ACCOUNT/POLICY 0313467 -09-786506 EFFECTIVE DATES 03/14/15 TO 03/14/16

COVERAGE

CLAIM#	CLMNT#	DATE OF LOSS	REPORTED BY	TITLE	DATE REPORTED	STATUS	TOTAL CLAIM
							.00

LOSS LOCATION	PAID
	.00

LOSS DESCRIPTION	ALLEGED INJURY/DAMAGE
------------------	-----------------------

TOTAL FOR POLICY NUMBER 09-786506 -	.00
TOTAL NUMBER OF CLAIMS	0
TOTAL FOR POLICY NUMBER 09-786506	.00
TOTAL NUMBER OF CLAIMS	0

This document is confidential and may contain information that is privileged, attorney work product, or exempt from disclosure under applicable law. If you have questions concerning the information contained in this document, please notify the Claims Department by phone at (800)554-2642, Option 2.