




CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)
December 18, 2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

If this certificate is being prepared for a party who has an insurable interest in the property, do not use this form. Use ACORD 27 or ACORD 28.

PRODUCER  GUY J. WINTERS, AGENT 570 E. NORTHWEST HWY DES PLAINES, IL 60016		CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL: ADDRESS: PRODUCER CUSTOMER ID:		FAX (A/C, No):	
INSURED VAN SOMEREN, RENE & CATHLEEN 5922 N. MULLIGAN AVE CHICAGO, IL 60646-5334		INSURER(S) AFFORDING COVERAGE		NAIC #	
		INSURER A: State Farm Fire and Casualty Company		25143	
		INSURER B:			
		INSURER C:			
		INSURER D:			
		INSURER E:			
		INSURER F:			

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

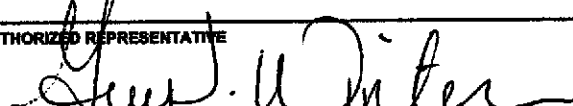
LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
1605 E. CENTRAL RD, ARLINGTON HTS, IL 60005-3368

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
	PROPERTY				<input checked="" type="checkbox"/> BUILDING	\$ 41200
	CAUSES OF LOSS				<input checked="" type="checkbox"/> PERSONAL PROPERTY	\$ 4100
	DEDUCTIBLES				BUSINESS INCOME	\$
	BASIC	BUILDING 500			EXTRA EXPENSE	\$
	BROAD	CONTENTS 500			RENTAL VALUE	\$
	SPECIAL				BLANKET BUILDING	\$
	EARTHQUAKE				BLANKET PERS PROP	\$
	WIND				BLANKET BLDG & PP	\$
	FLOOD				<input checked="" type="checkbox"/> BUSN LIABILITY	\$ 300000
					<input checked="" type="checkbox"/> GEN AGGREGT	\$ 600000
	INLAND MARINE	TYPE OF POLICY				\$
	CAUSES OF LOSS					\$
	NAMED PERILS	POLICY NUMBER				\$
						\$
	CRIME					\$
	TYPE OF POLICY					\$
						\$
	BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$
						\$
						\$
						\$

SPECIAL CONDITIONS / OTHER COVERAGES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

ADDITIONAL INSURED:
DANA POINT CONDOMINIUM ASSOCIATION, 1519 E. CENTRAL RD, ARLINGTON HTS, IL 60005-3302

CERTIFICATE HOLDER DANA POINT CONDOMINIUM ASSOCIATION 1605 1519 E. CENTRAL RD #422C ARLINGTON HTS, IL 60005-3302	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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