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AMENDED

Condominium Owners Policy Declarations

Summary

NAMED INSURED(S)

James & Susan Ayers
825 S Walnut
Arlington Hts IL 60005-2307

YOUR ALLSTATE AGENT IS:

M Sweazey & Assoc
800 S Northwest 102
Barrington IL 60010

CONTACT YOUR AGENT AT:

(847) 842-4900

POLICY NUMBER

9 11 122710 05/20

POLICY PERIOD

Begins on May 20, 2012
at 12:01 A.M. standard time,
with no fixed date of expiration

PREMIUM PERIOD

May 20, 2012 to May 20, 2013
at 12:01 A.M. standard time

LOCATION OF PROPERTY INSURED

1605 E Central Rd 111-B, Arlington Hts, IL 60005-3335

ADDITIONAL INTERESTED PARTY

- Dana Point Condominium Assoc C/O Lieberman
Management Services Suite 330
25 Northwest Point Blvd Elk Grove Village IL 60007-1056

Total Premium for the Premium Period (Your bill will be mailed separately)

Premium for Property Insured

\$166.00

TOTAL

\$166.00

Your policy change(s) are effective as of Dec. 18, 2012



Allstate Indemnity Company

Policy Number: 9 11 122710 05/20 Your Agent: M Sweazey & Assoc (847) 842-4900
For Premium Period Beginning: May 20, 2012

COVERAGE AND APPLICABLE DEDUCTIBLES

(See Policy for Applicable Terms, Conditions and Exclusions)

LIMITS OF LIABILITY

Building Property Protection

- \$500 All Peril Deductible Applies

\$10,000

Personal Property Protection - Actual Cash Value

- \$500 All Peril Deductible Applies

\$10,000

Additional Living Expense

Up To 12 Months

Loss Assessments

- \$250 All Peril Deductible Applies

\$1,000

each occurrence

DISCOUNTS

Your premium reflects the following discounts on applicable coverage(s):

Protective Device

5 %

Secondary Residence credit

RATING INFORMATION

The dwelling is of Brick construction and is occupied by 150 families

Your dwelling is 2 mile(s) to the fire department



Policy Number: 9 11 122710 05/20 Your Agent: M Sweazey & Assoc (847) 842-4900
For Premium Period Beginning: May 20, 2012

Your Policy Documents

Your Condominium Owners policy consists of this Policy Declarations and the documents listed below. Please keep these together.

- Condominium Owners Policy form AP894
- Illinois Amendatory Endorsement form AP1168-2
- Additional Insureds Endorsement form AU267
- Standard Fire Policy Provisions form AU277-2
- Amendment of Policy Provisions form AP4710
- Secondary Residence Endorsement form AU274

Important Payment and Coverage Information

The Property Insurance Adjustment condition applies using the Marshall Swift Boeckh publications personal property cost estimating index.

Please note: This is not a request for payment. Any adjustments to your premium will be reflected on your next scheduled bill which will be mailed separately.

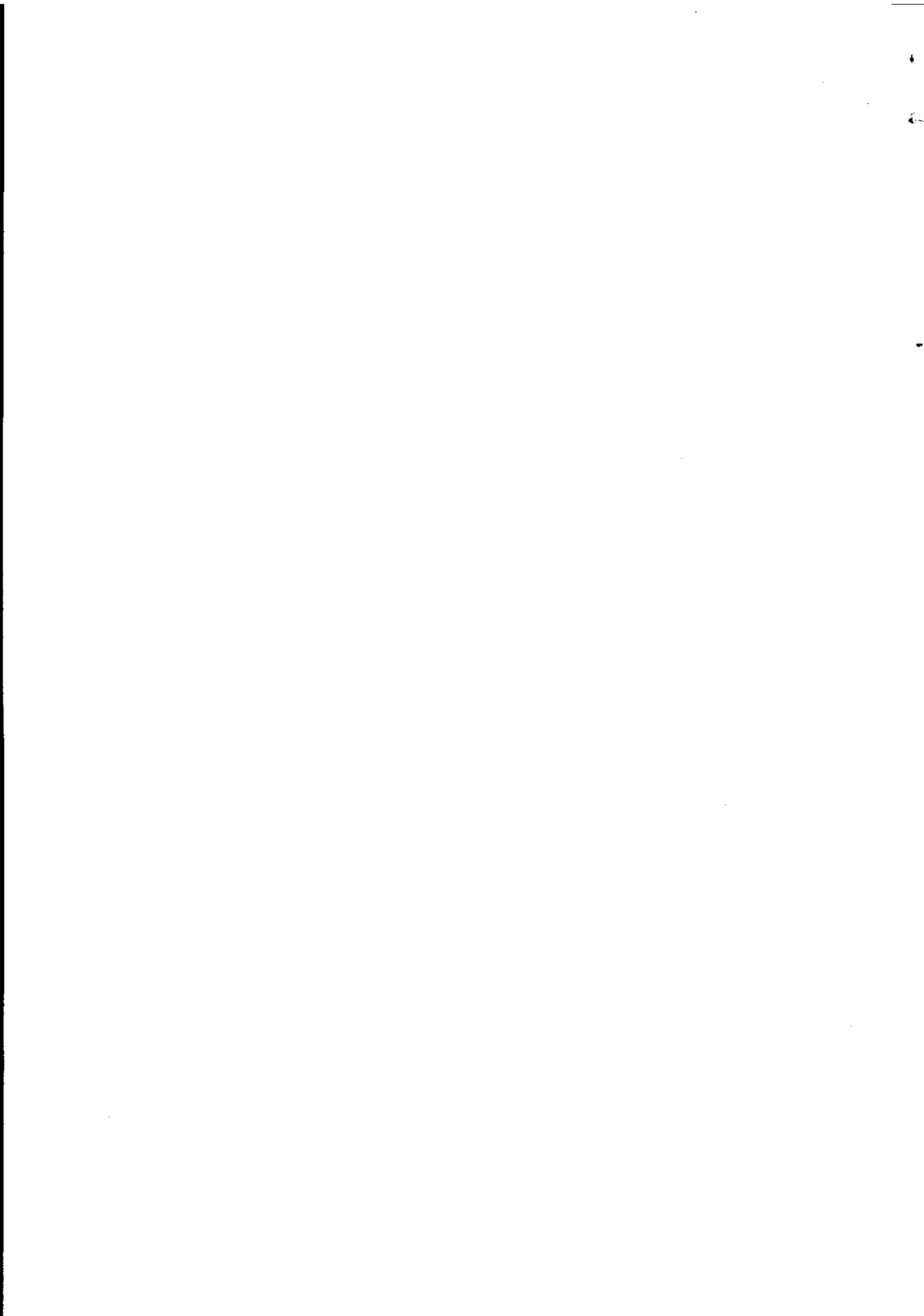
In the meantime, if you have any outstanding or unpaid bills, please pay at least the minimum amount due to assure your policy continues in force. If you have any questions, please contact your agent.

IN WITNESS WHEREOF, Allstate has caused this policy to be signed by two of its officers at Northbrook, Illinois, and if required by state law, this policy shall not be binding unless countersigned on the Policy Declarations by an authorized agent of Allstate.

Steven P. Sorenson
President

Mary J. McGinn
Secretary







Allstate.
You're in good hands.

Allstate Indemnity Company
PO BOX 40047
ROANOKE, VA 24022



Dana Point Condominium Assoc C/O Lieberman
Management Services Suite 330
25 Northwest Point Blvd
Elk Grove Vlg IL 60007-1056

Policy number: 9 11 122710 05/20
Reprint key: 1212175301294
Transaction: ENDORSEMENT

ADDITIONAL THIRD PARTY

PROP *5100012121753012940401*



MCD21-3

10. The following information is
provided for the year ended 31/12/2019

The following information is
provided for the year ended 31/12/2019
The following information is
provided for the year ended 31/12/2019
The following information is
provided for the year ended 31/12/2019



Allstate.
You're in good hands.

*M Sweazey & Assoc
800 S Northwest 102
Barrington IL 60010*

Your Quick Insurance Check

- ✓ Verify the information listed in the Policy Declarations.
- ✓ Please call if you have any questions.
- ✓ Now you can pay your premium before your bill is issued - visit allstate.com or call 1-800-Allstate®.



James & Susan Ayers
825 S Walnut Ave
Arlington Hts IL 60005-2307

Confirming Your Policy Change

We've sent along this mailing to verify the changes to your policy that you recently requested. The changes took effect on December 18, 2012. Please look over all the information in this mailing, and call us right away if you have any questions or if anything isn't exactly right.

The accompanying Amended Policy Declarations includes these changes:
An Additional Interested Party has been added.
Your address has been corrected.

There is no change in premium for the current premium period.

The coverages and limits you carry for your property, and the costs of those coverages, are listed in detail on the enclosed Amended Policy Declarations. You can see the specific changes to your policy by comparing this Amended Policy Declarations to the Policy Declarations previously mailed to you.

If you have any questions or concerns, please contact me at (847) 842-4900---or call the Allstate Customer Information Center at 1-800-ALLSTATE (1-800-255-7828).

Sincerely,

M Sweazey & Assoc
Your Allstate Agent

PROP *510001212121753012940402*

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MCD21-3

Information as of
December 17, 2012

EP29