



FARMERS

DECLARATIONS

HOMEOWNERS

Replaces all prior Declarations, if any

TOWNHOUSE/CONDOMINIUM OWNERS

ILLINOIS FARMERS INSURANCE COMPANY, AURORA, ILLINOIS
A Stock Company

TRANSACTION TYPE: OFFER OF RENEWAL

The Policy Period is effective (not prior to time applied for) at described residence premises.

POLICY NUMBER	POLICY PERIOD			POLICY EDITION
	FROM:	TO:	STANDARD TIME	
08006-16-13	10-01-2012	10-01-2013	12:00 NOON	04

ISSUING OFFICE:
P.O. BOX 149044
AUSTIN, TX 78714

This policy will continue for successive policy periods, if: (1) we elect to continue this insurance, and (2) if you pay the renewal premium for each successive policy period as required by our premiums, rules and forms then in effect.

INSURED'S NAME & MAILING ADDRESS:

CAROL L THOMAS

1505 E CENTRAL RD #413B
ARLINGTON HEIGHTS IL 60005-3332LOCATION OR DESCRIPTION OF RESIDENCE PREMISES:
(Same as mailing address unless otherwise stated.)

DESCRIPTION OF PROPERTY

YEAR OF CONSTRUCTION	CONSTRUCTION TYPE	ROOF TYPE	NUMBER	OCCUPANCY
1971	BRICK/JOISTED MASONRY	ASPHALT COMPOSITION	010	OWNER

COVERAGES - We provide insurance only for those coverages indicated by a specific limit or other notation.

SECTION I - PROPERTY			SECTION II - LIABILITY			ANNUAL PREMIUM
A - DWELLING OR MOBILE HOME	B - SEPARATE (OTHER) STRUCTURES	C - PERSONAL PROPERTY	D - LOSS OF USE	E - PERSONAL LIABILITY	F - MEDICAL PAY TO OTHERS	
NOT COV	NOT COV	\$30,000	\$12,000	\$300,000 Each Occurrence	\$1,000 Each Person	\$182.39

ENDORSEMENTS

ENDORSEMENT NUMBER	EDITION NUMBER	DESCRIPTION
E4041A	1ED	ENDORSEMENT AMENDING SECTION II - EXCLUSION
E6120	2ED	CONTENTS REPLACEMENT COST COVERAGE
E6161	1ED	BUILDING PROPERTY - LOSS ASSESSMENTS
E6268A	1ED	AMENDING DEBRIS REMOVAL COVERAGE AND POLLUTION EXC
H4166A	1ED	AMEND DEFINITIONS, SECTION I-LOSSES INSURED & NOT INSURED
H6106	1ED	SPECIAL LIMITS ON SPORTS CARDS
H6221A	1ED	ENDORSEMENT AMENDING SECTION II - EXCLUSIONS
J6003	1ED	ADDING LOCKSMITH SERVICES TO SECTION 1 - ILLINOIS
J6071A	1ED	END AMENDING ADD. COVERAGES - UNIT OWNERS BUILD PROPERTY
J6900A	1ED	ENDORSEMENT AMENDING GENERAL CONDITIONS IMPORTANT NOTICE ADDITIONAL ENDORSEMENTS SEE E0052

DISCOUNTS

50 PLUS AND AUTO/HOME DISCOUNTS HAVE BEEN APPLIED TO YOUR POLICY.

DEDUCTIBLES

Deductible applicable to each covered loss:

\$250

POLICY ACTIVITY Do not pay - invoice sent separately

\$ NONE	Previous Balance	
182.39	Premium Fees *	ANY "TOTAL" BALANCE OR CREDIT \$7.00 OR LESS WILL BE APPLIED TO YOUR NEXT BILLING. BALANCES OVER \$7.00 ARE DUE UPON RECEIPT.
	Payments or Credits	
\$ NONE	Total * INSURED PAYS	

*SEE ADDITIONAL FEE INFORMATION BELOW

This Declarations page is part of your policy. It supersedes and controls anything to the contrary. It is otherwise subject to all other terms of the policy.

Countersignature

Authorized Representative

AGENT: KENNETH C. MORE

AGENT PHONE: (847) 577-2700

AGENT NUMBER: 22 03 383