



CHARLIE BROWN HEARING AIDS LLC
ATTN: CHARLIE BROWN
3012 FLAMINGO DR
SAINT CHARLES MO 63301-1244

State Farm Fire and Casualty Company
A stock company with home offices in Bloomington, Illinois

IMPORTANT NOTICE

Policy Information

Policy number: 95-NP-2683-9

September 12, 2022

We're contacting you about the above State Farm® policy.

We're enclosing your Declarations, and any new applicable endorsements, based on some recent policy changes you requested. Please review your coverage selections carefully. If you have any questions about the coverage listed on your Declarations, or you believe any information is incorrect, please contact your State Farm agent right away.

This is not a bill. The policy premium is being added to your billing account.

THANK YOU FOR CHOOSING STATE FARM. WE APPRECIATE YOUR BUSINESS.

If you have any questions, call your State Farm Agent Kevin Pierce at 636-949-2244. If you are deaf, hard of hearing, or do not use your voice to communicate, you may contact us via 711 or other relay services.

cc: Kevin Pierce
25-16B3



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State Farm Fire and Casualty Company
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Your State Farm Agent

Kevin Pierce
210 S Second Street
St Charles MO 63301-2809
Bus: 636-949-2244
Email: kevin.pierce.quj0@statefarm.com

Amended Declarations

Policy number: 95-NP-2683-9

Policy period: 12 months

The policy period begins and ends at 12:01 am standard time at the premises location.

Effective date: September 2, 2022

Expiration date: September 2, 2023

BUSINESSOWNERS POLICY

Automatic renewal - If the State Farm® policy period is shown as **12 months**, this policy will be renewed automatically subject to the premiums, rules and forms in effect for each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

NAMED INSURED

CHARLIE BROWN HEARING AIDS LLC

ENTITY

Limited Liability Company

IMPORTANT MESSAGE(S)

State Farm at CityLine Telephone Number: 309-763-1000

REASONS FOR DECLARATIONS

Your policy is amended effective September 2, 2022 due to some recent policy changes you requested. Enclosed is a copy of your new endorsements, if any.

POLICY PREMIUM

This is not a bill. If an amount is due, then a separate statement will be sent prior to the due date. The premium(s) shown below are for the policy period and policy characteristics as described in this Declarations.

Change in premium: none*

*Minimum Premium

Discounts applied:

Business Experience Rating

SECTION I - PROPERTY SCHEDULE

| Location number | Location of described premises | Limit of Insurance* Coverage A - Buildings | Limit of Insurance* Coverage B - Business Personal Property | Seasonal Increase - Business Personal Property |
|-----------------|---|--|---|---|
| 001 | 100 Chstrfld Bus Pkwy Ste 200 Chesterfield MO 63005-1271 | No Coverage | \$5,000 | 25% |

* As of the effective date of this policy, the Limit of Insurance as shown includes any increase in the limit due to Inflation Coverage.

SECTION I – INFLATION COVERAGE INDEX(ES)

| | |
|-----------------------------------|-------|
| Cov A - Inflation Coverage Index: | N/A |
| Cov B - Consumer Price Index: | 296.3 |

SECTION I – DEDUCTIBLES

BASIC DEDUCTIBLE \$1,000

SPECIAL DEDUCTIBLES:

| | |
|-----------------------|---------|
| Equipment Breakdown: | \$1,000 |
| Money and Securities: | \$250 |

Other deductibles may apply - refer to policy.

SECTION I – EXTENSIONS OF COVERAGE - LIMIT OF INSURANCE - EACH DESCRIBED PREMISES

The coverages and corresponding limits shown below apply separately to each described premises shown in these Declarations, unless indicated by “See schedule”. If a coverage does not have a corresponding limit shown below, but has “Included” indicated, refer to that policy provision for an explanation of that coverage.

| Coverage | Limit of Insurance |
|---|---------------------|
| Accounts Receivable | |
| On Premises | \$10,000 |
| Off Premises | \$5,000 |
| Arson Reward | \$5,000 |
| Collapse | Included |
| Damage to Non-owned Buildings from Theft, Burglary or Robbery | Coverage B Limit |
| Debris Removal | 25% of covered loss |
| Equipment Breakdown | Included |
| Fire Department Service Charge | \$2,500 |
| Fire Extinguisher Systems Recharge Expense | \$5,000 |
| Forgery or Alteration | \$10,000 |
| Glass Expenses | Included |
| Increased Cost of Construction and Demolition Costs (applies only when buildings are insured on a replacement cost basis) | 10% |
| Money Orders and Counterfeit Money | \$1,000 |

| Coverage | Limit of Insurance |
|--|--------------------|
| Money and Securities | |
| On Premises | \$5,000 |
| Off Premises | \$2,000 |
| Newly Acquired Business Personal Property (applies only if this policy provides Coverage B - Business Personal Property) | \$100,000 |
| Newly Acquired or Constructed Buildings (applies only if this policy provides Coverage A - Buildings) | \$250,000 |
| Ordinance or Law - Equipment Coverage | Included |
| Outdoor Property | \$5,000 |
| Personal Effects (applies only to those premises provided Coverage B - Business Personal Property) | \$2,500 |
| Personal Property Off Premises | \$15,000 |
| Pollutant Clean Up and Removal | \$10,000 |
| Preservation of Property | 30 days |
| Property of Others (applies only to those premises provided Coverage B - Business Personal Property) | \$2,500 |
| Signs | \$2,500 |
| Valuable Papers and Records | |
| On Premises | \$10,000 |
| Off Premises | \$5,000 |
| Water Damage, Other Liquids, Powder or Molten Material Damage | Included |

SECTION I – EXTENSIONS OF COVERAGE - LIMIT OF INSURANCE - PER POLICY

The coverages and corresponding limits shown below are the most we will pay regardless of the number of described premises shown in these Declarations.

| Coverage | Limit of Insurance |
|----------------------------------|---------------------------------|
| Loss of Income and Extra Expense | 12 Months Actual Loss Sustained |

SECTION II - LOCATION SCHEDULE

| Location number | Location of described premises |
|-----------------|---|
| 001 | 100 Chstrfld Bus Pkwy Ste 200 Chesterfield MO 63005-1271 |

SECTION II - LIABILITY

| Coverage | Limit of Insurance |
|--|------------------------|
| Coverage L - Business Liability Per Occurrence | \$2,000,000 |
| Coverage M - Medical Expenses | \$5,000 Any One Person |
| Damage to Premises Rented to You | \$300,000 |
| Aggregate Limits | Limit of Insurance |
| General Aggregate | \$4,000,000 |
| Products/Completed Operations Liability-Annual Aggregate | Excluded |

Each paid claim for Liability Coverage reduces the amount of insurance we provide during the applicable annual period. Please refer to Section II – Liability in the Coverage Form and any attached endorsements.

Your policy consists of these Declarations, the BUSINESSOWNERS COVERAGE FORM shown below, and any other forms and endorsements that apply, including those shown below as well as those issued subsequent to the issuance of this policy.

FORMS AND ENDORSEMENTS

| | |
|------------|--|
| CMP-4100 | Businessowners Coverage Form |
| CMP-4225.2 | Amendatory Endorsement (Missouri) |
| CMP-4561.1 | Policy Endorsement |
| CMP-4705.2 | Loss of Income and Extra Expense |
| CMP-4709 | Money and Securities |
| CMP-4845 | Exclusion - Products - Completed Operations Hazard |
| FD-6007 | Inland Marine Attaching Declarations |
| FE-3650 | Actual Cash Value Endorsement |
| FE-6999.3 | Policyholder Disclosure Notice of Terrorism Insurance Coverage |

This policy is issued by the State Farm Fire and Casualty Company.

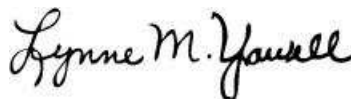
PARTICIPATING POLICY

You are entitled to participate in a distribution of the earnings of the company as determined by our Board of Directors in accordance with the Company's Articles of Incorporation, as amended.

In Witness Whereof, the State Farm Fire and Casualty Company has caused this policy to be signed by its President and Secretary at Bloomington, Illinois.



President



Secretary



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Inland Marine Attaching Declarations

Policy number: 95-NP-2683-9

Effective date: September 2, 2022

Policy period: 12 months

Expiration date: September 2, 2023

The policy period begins and ends at 12:01 am standard time at the premises location.

ATTACHING INLAND MARINE

Automatic renewal - If the State Farm® policy period is shown as **12 months**, this policy will be renewed automatically subject to the premiums, rules and forms in effect for each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

Annual policy premium: Included

The above premium amount is included in the Policy Premium shown on the Declarations.

Your policy consists of these Declarations, the INLAND MARINE CONDITIONS shown below, and any other forms and endorsements that apply, including those shown below as well as those issued subsequent to the issuance of this policy.

FORMS, OPTIONS AND ENDORSEMENTS

| | |
|-----------|---|
| FE-8207.1 | Inland Marine Amendatory Endorsement (Missouri) |
| FE-8739 | Inland Marine Conditions |
| FE-8743.1 | Inland Marine Computer Property Form |
| | See below for schedule page with limits |

ATTACHING INLAND MARINE SCHEDULE PAGE

| Endorsement number | Coverage | Limit of insurance | Deductible amount | Annual premium |
|--------------------|--------------------------------------|--------------------|-------------------|----------------|
| FE-8743.1 | Inland Marine Computer Property Form | \$25,000 | \$500 | Included |
| | Loss of Income and Extra Expense | \$25,000 | | Included |

Other limits and exclusions may apply - refer to your policy.

In accordance with the Terrorism Risk Insurance Act of 2002 as amended and extended by the Terrorism Risk Insurance Program Reauthorization Act of 2019, this disclosure is part of your policy.

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

Coverage for acts of terrorism is not excluded from your policy. However your policy does contain other exclusions which may be applicable, such as an exclusion for nuclear hazard. You are hereby notified that the Terrorism Risk Insurance Act, as amended in 2019, defines an act of terrorism in Section 102(1) of the Act: The term “act of terrorism” means any act that is certified by the Secretary of the Treasury—in consultation with the Secretary of Homeland Security, and the Attorney General of the United States—to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion. Under this policy, any covered losses resulting from certified acts of terrorism may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act, as amended. Under the formula, the United States Government generally reimburses 80% beginning on January 1, 2020 of covered terrorism losses exceeding the statutorily established deductible paid by the insurance company providing the coverage. The Terrorism Risk Insurance Act, as amended, contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurers’ liability for losses resulting from certified acts of terrorism when the amount of such losses exceeds \$100 billion in any one calendar year. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

There is no separate premium charged to cover insured losses caused by terrorism. Your insurance policy establishes the coverage that exists for insured losses. This notice does not expand coverage beyond that described in your policy.

THIS IS YOUR NOTIFICATION THAT UNDER THE TERRORISM RISK INSURANCE ACT, AS AMENDED, ANY LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM UNDER YOUR POLICY MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT AND MAY BE SUBJECT TO A \$100 BILLION CAP THAT MAY REDUCE YOUR COVERAGE.