

P.O. Box 799100
Dallas, TX 75379-9100

M-23-0986-FB92 F V

001854 3123

Named InsuredGLENORA GARDEN HOMES IV INC
ATTN WESTERN CONDO MGMT
PO BOX 3057
SAN DIMAS CA 91773-7057**Policy Number** 92-82-3431-8

Policy Period	Effective Date	Expiration Date
12 Months	JUN 15 2016	JUN 15 2017

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

Agent and Mailing AddressMIKE FERRARO-JR
2503 EASTBLUFF DR STE 201
NEWPORT BEACH CA 92660-3550PHONE: (949) 645-6000
(800) 448-4664**Residential Community Association Policy**

Automatic Renewal - If the **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.

Entity: Corporation**Requested By:**

Policyholder

Policy Premium \$ 18,024.00

Discounts Applied:
Renewal Year
Multiple Unit
Claim RecordPrepared
AUG 02 2016
CMP-4000© Copyright, State Farm Mutual Automobile Insurance Company, 2008
Includes copyrighted material of Insurance Services Office, Inc., with its permission.014607 290 I
N

Continued on Reverse Side of Page

Page 1 of 8

DECLARATIONS (CONTINUED)

Residential Community Association Policy for GLENDORA GARDEN HOMES IV INC
 Policy Number 92-82-3431-8

SECTION I - INFLATION COVERAGE INDEX(ES)

Inflation Coverage Index: 179.9

SECTION I - DEDUCTIBLES

Basic Deductible \$1,000

Special Deductibles:

Money and Securities	\$250	Employee Dishonesty	\$250
Equipment Breakdown	\$1,000		

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, please refer to that policy provision for an explanation of that coverage.

COVERAGE	LIMIT OF INSURANCE
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	\$5,000
Fire Extinguisher Systems Recharge Expense	\$5,000
Glass Expenses	Included

Prepared
 AUG 02 2016
 CMP-4000

© Copyright, State Farm Mutual Automobile Insurance Company, 2008
 Includes copyrighted material of Insurance Services Office, Inc., with its permission.