

State Farm Fire and Casualty Company
2702 Ireland Grove Road
Bloomington, IL 61709-0001

AT1 B-01- L F

001215 0001
MICHAEL & KATHLEEN

IL 60070



Forms and Endorsements

Personal Liability Umbrella	FP-7950.2
Uninsured/Underinsured Cov	FE-5894
Amendatory Endorsement	FE-7689.2
Fuel Oil Exclusion	FE-5837
Civil Union Endorsement	FE-8790

POLICY NUMBER 13-36

Personal Liability Ur la Policy
NOV 01 2014 to NOV 01 2015

DATE DUE	SEE BALANCE DUE NOTICE
NOV 01 2014	\$1,526.00

COVERAGES AND LIMITS

L Personal Liability	\$3,000,000
Self-Insured Retention	None
U Uninsured and Underinsured	3,000,000
Motor Vehicle	

UNDERLYING EXPOSURES

Our records show the following underlying information. This information was used in determining the rate of the policy.

AUTOMOBILE EXPOSURES

Automobile(s)	2
Rec Motor Vehicle(s)	1
Automobile Operator(s)	4

OTHER LIABILITY EXPOSURES

Personal Residential	-
Watercraft	-

Annual Premium	\$1,526.00
Coverage L	752.00
Coverage U	774.00
Amount Due	\$1,526.00

*Notify your agent immediately if the above listed Coverages and/or Underlying Exposures are incorrect. Your Coverages and/or bill can be affected if this information is not correct.

The Class 50 Discount has reduced the premium on your policy by \$117.00

Required Underlying Insurance on reverse side

Thanks for letting us serve you...

3814 201 1

Agent [redacted]
Telephone (773) [redacted]

Moving? See your State Farm agent.
See reverse for important information.

REB

Prepared AUG 22 2014

P.O. Box 82542
Lincoln, NE 68501-2542

L-05- [REDACTED] H W F

002778 0001

KATHLEEN

IL 60070- [REDACTED]



Location: [REDACTED]
MUKWONAGO WI
53149- [REDACTED]

Loss Settlement Provisions (See Policy)
A1 Replacement Cost - Similar Construction
B1 Limited Replacement Cost - Coverage B

Forms, Options, and Endorsements

Homeowners Pol FP-7955.MW
Increase Dwlg up to \$147,960 OPT ID
Additional Insured OPT AI
Jewelry and Furs \$1,500/\$2,500 OPT JF
Homeowners Policy Endorsement FE-3548
Amendatory Endorsement FE-2356
Back-Up of Sewer or Drain * FE-5448.2

*Effective: AUG 23 2014

RENEWAL CERTIFICATE

POLICY NUMBER 49-E0- [REDACTED]
Homeowners Pol
AUG 23 2014 to AUG 23 2015

DATE DUE SEE BALANCE DUE NOTICE
AUG 23 2014 \$1,452.00

Coverages and Limits

Section I

A Dwelling \$739,800
Dwelling Extension Up To 73,980
B Personal Property 554,850
C Loss of Use Actual Loss Sustained

Deductibles - Section I

All Losses 1/2% 3,699

Section II

L Personal Liability \$300,000
Damage to Property of Others 500
M Medical Payments to Others 1,000
(Each Person)

Annual Premium \$1,452.00
Amount Due \$1,452.00

Premium Reductions

Home Alert Discount 91.0
Home/Auto Discount 700.0
Claim Record Discount 500.0

Inflation Coverage Index: 214.4

NOTICE: Information concerning changes in your policy language is included. Please call your agent if you have any questions.

We are required by Wisconsin Law to inform you that if your payment is not received within 12 days after the due date, a notice will be sent stating the effective date of any cancellation for nonpayment.

Please help us update the data used to determine your premium. Contact your agent with the year each of your home's utilities (heating/cooling, plumbing, or electrical) and roof were last updated.

Personal WI -

Thanks for letting us serve you. We appreciate our long term customers.
Agent [REDACTED] INS AGENCY INC
Telephone (262)-[REDACTED] or (262)-[REDACTED]

Moving? See your State Farm agent.
See reverse for important information.
Prepared JUN 17 2014

Homeowners Policy
JUN 27 2014 to JUN 27 2015

AT1 E-01 [REDACTED] H W F

007168 0001

KATHLEEN [REDACTED]

IL 60070- [REDACTED]

TO BE PAID BY INSURED

Coverages and Limits

Section I

A Dwelling		\$1,162,700
Dwelling Extension	Up To	116,270
B Personal Property		872,025
C Loss of Use		Actual Loss Sustained

Deductibles - Section I

All Losses		1,000
------------	--	-------

Section II

L Personal Liability		\$300,000
Damage to Property of Others		500
M Medical Payments to Others		5,000
(Each Person)		

Annual Premium

Sewer & Drain	462.00	\$2,757.00 (Included)
---------------	--------	-----------------------

Premium Reductions

Home Alert Discount		117.00
Home/Auto Discount		896.00
Claim Record Discount		640.00

Inflation Coverage Index: 238.8

Insured: [REDACTED]

Location: [REDACTED] IL 60070 [REDACTED]

Loss Settlement Provisions (See Policy)
1 Replacement Cost - Similar Construction
1 Limited Replacement Cost - Coverage B

Forms, Options, and Endorsements

Homeowners Policy
Back-Up Dwelling/Pers Property
Increase Dwlg up to \$232,540
Ordinance/Law 10%/ \$116,270
Civil Union Endorsement
Homeowners Policy Endorsement
Mandatory Endorsement
Jewelry and Furs \$1,500/\$2,500

FP-7955 .IL
FE-7834 .4
OPT ID
OPT OL
FE-8790
FE-3452
FE-2348
OPT JF

Primary Home -

Please help us update the data used to determine your premium. Contact your agent with the year each of your home's utilities (heating/cooling, plumbing, or electrical) and roof were last updated.

Thanks for letting us serve you. We appreciate our long term customers.

Agent [REDACTED]
Telephone [REDACTED]

Moving? See your State Farm agent.
See reverse for important information.
Prepared APR 17 2014

AT1

001120 0001

E [REDACTED] P F

MIKE & KATHLEEN

IL 60070-1 [REDACTED]

SI-1
0101-1001

Location: Same as Mailing Address

Forms, Options, and Endorsements

Personal Articles Policy
Amendatory Endorsement
Pair & Set Coverage
Civil Union Endorsement

FP-7940.2
FE-7620.1
OPT 0
FE-8790

DATE DUE SEE BALANCE DUE NOTICE

AUG 17 2014

\$1,870.00

Coverages and Limits

Class of Property

Amount of Insurance

Jewelry

\$120,045

**Annual Premium
Amount Due**

\$1,870.00
\$1,870.00

Premium Reductions

Home Alert Discount

Thanks for letting us serve you...

3513 201 1

Agent [REDACTED]
Telephone [REDACTED]

Moving? See your State Farm agent.
See reverse for important information.

Prepared

REB

JUN 09 2014

AT1 E-01- 2292-FADD H W F

007168 0001

KATHLEEN

IL 60070-1

0101-0000

Insured: [Redacted]

Location: [Redacted] IL 60070-1

Loss Settlement Provisions (See Policy)
A1 Replacement Cost - Similar Construction
B1 Limited Replacement Cost - Coverage B

Forms, Options, and Endorsements

Homeowners Policy	FP-7955 .IL
Back-Up Dwelling/Pers Property	FE-7834 .4
Increase Dwlg up to \$232,540	OPT ID
Ordinance/Law 10%/ \$116,270	OPT OL
Civil Union Endorsement	FE-8790
Homeowners Policy Endorsement	FE-3452
Amendatory Endorsement	FE-2348
Jewelry and Furs \$1,500/\$2,500	OPT JF

TO BE PAID BY INSURED

Coverages and Limits

Section I

A Dwelling		\$1,162,700
Dwelling Extension	Up To	116,270
B Personal Property		872,025
C Loss of Use		Actual Loss Sustained

Deductibles - Section I

All Losses 1,000

Section II

L Personal Liability	\$300,000
Damage to Property of Others	500
M Medical Payments to Others (Each Person)	5,000

Annual Premium

Sewer & Drain	462.00	\$2,757.00 (Included)
---------------	--------	-----------------------

Premium Reductions

Home Alert Discount	117.00
Home/Auto Discount	896.00
Claim Record Discount	640.00

Inflation Coverage Index: 238.8

Please help us update the data used to determine your premium. Contact your agent with the year each of your home's utilities (heating/cooling, plumbing, or electrical) and roof were last updated.

Thanks for letting us serve you. We appreciate our long term customers.
Agent [Redacted]
Telephone [Redacted]

Moving? See your State Farm agent.
See reverse for important information.
Prepared APR 17 2014

POLICY NUMBER 13-3
Personal Lia Umbrella Policy
NOV 01 2014 NOV 01 2015

AT1 B-0 L F

001215 0001

MICHAEL & KATHLEEN

IL 60070

DATE DUE	SEE BALANCE DUE NOTICE
NOV 01 2014	\$1,526.00

COVERAGES AND LIMITS

L Personal Liability	\$3,000,000
Self-Insured Retention	None
U Uninsured and Underinsured	3,000,000
Motor Vehicle	

UNDERLYING EXPOSURES

Our records show the following underlying information. This information was used in determining the rate of the policy.

AUTOMOBILE EXPOSURES

Automobile(s)	2 1
Rec Motor Vehicle(s)	1
Automobile Operator(s)	4

OTHER LIABILITY EXPOSURES

Personal Residential	- 2
Watercraft	- 4

Annual Premium	\$1,526.00
Coverage L	752.00
Coverage U	774.00
Amount Due	\$1,526.00

Forms and Endorsements

Personal Liability Umbrella	FP-7950.2
Uninsured/Underinsured Cov	FE-5894
Amendatory Endorsement	FE-7689.2
Fuel Oil Exclusion	FE-5837
Civil Union Endorsement	FE-8790

*Notify your agent immediately if the above listed Coverages and/or Underlying Exposures are incorrect. Your Coverages and/or bill can be affected if this information is not correct.

The Class 50 Discount has reduced the premium on your policy by \$117.00

Required Underlying Insurance on reverse side

Thanks for letting us serve you...

Agent [Redacted]
Telephone [Redacted]

Moving? See your State Farm agent.
See reverse for important information.
Prepared AUG 22 2014

SI-1
0101-1001

01130886b
10-11-2010

AT2 003607 0008 4JA-2292 A

MICHAEL & KATHLEEN

IL 60070-

AUTO RENEWAL

AMOUNT DUE: \$346.01

Payment is due by July 21, 2014

Your State Farm Agent

Office: [REDACTED]

Address: [REDACTED]

If you have a new or different car, have added any drivers, or have moved, please contact your agent.

Policy Number: 542 [REDACTED]
Policy Period: July 21, 2014 to July 21, 2015

Vehicle:
1997 HRLY DVDSN FXSTC

Principal Driver:
[REDACTED]

CONVENIENT PAYMENT OPTION: We offer a 50-50 payment plan which divides your premium into two separate payments for a \$2.00 handling charge. To use the plan, submit one half of your premium plus the \$2.00. The balance will be due 60 days after your renewal date. We'll send you a reminder notice.

The amount you pay is for 12 months.

Payment of this premium will renew your motorcycle policy for one year. Because there is practically no charge for coverage during the winter months, it makes sense to keep

your policy in force the year round, regardless of the weather.

This policy expires on the date due if premium is not paid.

When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon

(continued on next page)

Policy Number: 542 [REDACTED]
Prepared June 13, 2014
1004583

Page number 1 of 4

↓ Please fold and tear here ↓

Pay to Pay
Your Way



Online
PC or
mobile devices



Mobile
Download our
Pocket Agent App



Mail
Send us
a check



Call your Agent 773-774-1500
Automated line: 1-800-440-0998
Key code: 1379439564



Walk In
See your
State Farm Agent

State Farm

Insured: [REDACTED]

Policy Number: [REDACTED]

Amount Due: \$346.01

Payment due by July 21, 2014

Make payment to State Farm

0109408125

Insurance Support Center
P.O. Box 680001
Dallas, TX 75368-0001



For Office Use Only

AUTO REN	\$346.01	0812
----------	----------	------

4-A44JA 2292-FADD
APP DT 08-30-2014 MUTL VOL

0102-9102

L-05- [REDACTED] H W F

002778 0001

IL 60070 [REDACTED]

511-001
0205-001

Location: [REDACTED]
MUKWONAGO WI
[REDACTED]

Loss Settlement Provisions (See Policy)
A1 Replacement Cost - Similar Construction
B1 Limited Replacement Cost - Coverage B

Forms, Options, and Endorsements

Homeowners Pol	FP-7955.MW
Increase Dwlg up to \$147,960	OPT ID
Additional Insured	OPT AI
Jewelry and Furs \$1,500/\$2,500	OPT JF
Homeowners Policy Endorsement	FE-3548
Amendatory Endorsement	FE-2356
Back-Up of Sewer or Drain	* FE-5448.2

*Effective: AUG 23 2014

DATE DUE	SEE BALANCE DUE NOTICE
AUG 23 2014	\$1,452.00

Coverages and Limits

Section I

A Dwelling		\$739,800
Dwelling Extension	Up To	73,980
B Personal Property		554,850
C Loss of Use		Actual Loss Sustained

Deductibles - Section I

All Losses 1/2% 3,699

Section II

L Personal Liability	\$300,000
Damage to Property of Others	500
M Medical Payments to Others (Each Person)	1,000

Annual Premium	\$1,452.00
Amount Due	\$1,452.00

Premium Reductions

Home Alert Discount	91.00
Home/Auto Discount	700.00
Claim Record Discount	500.00

Inflation Coverage Index: 214.4

NOTICE: Information concerning changes in your policy language is included. Please call your agent if you have any questions.

We are required by Wisconsin Law to inform you that if your payment is not received within 12 days after the due date, a notice will be sent stating the effective date of any cancellation for nonpayment.

Please help us update the data used to determine your premium. Contact your agent with the year each of your home's utilities (heating/cooling, plumbing, or electrical) and roof were last updated.

Thanks for letting us serve you. We appreciate our long-term customers.

8725 201B 1
* YY,NP,DR,61,9S

Agent JC [REDACTED]
Telephone [REDACTED]

REP

Moving? See your State Farm agent.
See reverse for important information.

Prepared JUN 17 2014

P.O. Box 82542
Lincoln, NE 68501-2542

POLICY NUMBER 49-GD- [REDACTED]

Boatowners F
SEP 11 2014 to SEP 11 2015

AT1 [REDACTED] B F
003981 0001
& KATHLEEN
60070 [REDACTED]

DATE DUE SEE BALANCE DUE NOTICE
SEP 11 2014 \$255.00

Coverages and Limits

Section I

Boats, Equipment, Motors \$23,000
Boat Trailers 2,000

Deductibles - Section I

All Losses 250

Section II

L Watercraft Liability \$1,000,000
M Watercraft Medical Payment (Each Person) 5,000

Annual Premium \$255.00
Amount Due \$255.00

Location: N9395 ISLAND DR
MUKWONAGO WI
53149-1847

Forms, Options, and Endorsements

Boatowners Policy FP-7900.1
Amendatory Endorsement FE-7865.1
Cancellation Endorsement FE-5704
Mandatory Reporting Endorsement FE-5801
Navigational Extension FE-7854.2

Boat: 2007 ALUMICRAFT DOMINATOR Description: ACBV4 [REDACTED]

Trailer: 2007 EZ LOADER Serial No: 12EAAAM [REDACTED]

We are required by Wisconsin Law to inform you that if your payment is not received within 12 days after the due date, a notice will be sent stating the effective date of any cancellation for nonpayment.

Thanks for letting us serve you...

Agent Telephone [REDACTED]

Moving? See your State Farm agent.
See reverse for important information.

Prepared JUL 03 2014

Boatowners P
SEP 21 2014 to SEP 21 2015

AT1

002042 0001

[REDACTED] & KATHLEEN

IL 60070 [REDACTED]

DATE DUE	SEE BALANCE DUE NOTICE
SEP 21 2014	\$401.00

Coverages and Limits

Section I

Boats, Equipment, Motors \$60,000

Deductibles - Section I

All Losses 1,000

Section II

L Watercraft Liability \$1,000,000

M Watercraft Medical Payment (Each Person) 5,000

Annual Premium \$401.00
Amount Due \$401.00

Location: [REDACTED]
MUKWONAGO WI
53149- [REDACTED]

Forms, Options, and Endorsements

Boatowners Policy	FP-7900.1
Amendatory Endorsement	FE-7865.1
Cancellation Endorsement	FE-5704
Mandatory Reporting Endorsement	FE-5801
Navigational Extension	FE-7854.2

Boat: 2004 CHAPARRAE SUNESTA

Description: 7GBT [REDACTED]

We are required by Wisconsin Law to inform you that if your payment is not received within 12 days after the due date, a notice will be sent stating the effective date of any cancellation for nonpayment.

Thanks for letting us serve you...

201

Agent [REDACTED]
Telephone [REDACTED]

Moving? See your State Farm agent.
See reverse for important information.
Prepared

REB

JUL 16 2014

POLICY NUMBER 49	
Boatowners Pr MAY 05 2013 to MAY 05 2014	
DATE DUE	SEE BALANCE DUE NOTICE
MAY 05 2013	\$197.00

AT1 L-05- [REDACTED] B F
001650-0001
IL 60076 [REDACTED]

Coverages and Limits

Section I
Boats, Equipment, Motors \$7,500
Boat Trailers 1,400

Deductibles - Section I
All Losses 250

Section II
L Watercraft Liability \$300,000
M Watercraft Medical Payment (Each Person) 5,000

Annual Premium \$197.00
Amount Due \$197.00

Location: [REDACTED]
MUKWONAGO WI
53149 [REDACTED]

Forms, Options, and Endorsements

Boatowners Policy FP-7900.1
Amendatory Endorsement FE-7865.1
Cancellation Endorsement FE-5704
Mandatory Reporting Endorsement FE-5801
Navigational Extension * FE-7854.2

*Effective: MAY 05 2013

Boat: 2006 SEADOO GT1SE Description: XDV [REDACTED]
Trailer: 2006 SHORELE PWC2213 Serial No: 1MDKN [REDACTED]

NOTICE: Information concerning changes in your policy language is included. Please call your agent if you have any questions.

We are required by Wisconsin Law to inform you that if your payment is not received within 12 days after the due date, a notice will be sent stating the effective date of any cancellation for nonpayment.

Thanks for letting us serve you...

936 201E 1 Agent [REDACTED]
Telephone [REDACTED]

Moving? See your State Farm agent.
See reverse for important information.

Prepared FEB 27 2013
REB

0102-810CH

State Farm Life and Casualty Company
P.O. Box 82542
Lincoln, NE 68501-2542

AT1

001649 0001

THLEEN

IL 60070

B

F

0102-S1101H

Location:

MUKWONAGO WI
53149

Forms, Options, and Endorsements

Boatowners Policy	FP-7900.1
Amendatory Endorsement	FE-7865.1
Cancellation Endorsement	FE-5704
Mandatory Reporting Endorsement	FE-5801
Navigational Extension	* FE-7854.2

*Effective: MAY 05 2013

POLICY NUMBER 49	
Boatowners Po MAY 05 2013 to MAY 05 2014	
DATE DUE	SEE BALANCE DUE NOTICE
MAY 05 2013	\$184.00
Coverages and Limits	
Section I	
Boats, Equipment, Motors	\$7,500
Deductibles - Section I	
All Losses	250
Section II	
L Watercraft Liability	\$300,000
M Watercraft Medical Payment (Each Person)	5,000
Annual Premium	\$184.00
Amount Due	\$184.00

Boat: 2006 SEA DOO GTISE

Description: YDV

NOTICE: Information concerning changes in your policy language is included. Please call your agent if you have any questions.

We are required by Wisconsin Law to inform you that if your payment is not received within 12 days after the due date, a notice will be sent stating the effective date of any cancellation for nonpayment.

Thanks for letting us serve you....

5934

201E

Agent

Telephone

Moving? See your State Farm agent.
See reverse for important information.

Prepared

REB

FEB 27 2013

135-3076 L3 10-11-2010 (01130896)