CERTIFICATE OF LIABILITY INSURANCE

American Family Insurance Company
American Family Mutual Insurance Company, S.I. if selection box is not checked.

6000 American Pky Madison, Wisconsin 53783-0001

Insured's Name and Address Alpine Village Homeowners Association 2650 North Ave Unit 116 Grand Junction, CO 81501 Agent's Name, Address and Phone Number (Agt./Dist.) Michael L Daniels 2648 Patterson Rd Ste G Grand Junction, CO 81506 (970) 241-6132 (124/307)

This certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This certificate does not amend extend or after the coverage afforded by the policies listed below

COVERAGES						
				ted, notwithstanding any requirement, term or cor erein is subject to all the terms, exclusions, and co		
TYPE OF INCUPANCE	POLICY NUMBER	POLICY DATE		LIMITS OF LIABILITY		
TYPE OF INSURANCE		EFFECTIVE (Mo, Day, Yr)	EXPIRATION (Mo, Day, Yr)	LIMITS OF LIABILIT		
Homeowners/				Bodily Injury and Property Damage		
Mobilehomeowners Liability				Each Occurrence	\$,00
Boatowners Liability				Bodily Injury and Property Damage		
				Each Occurrence	\$,00
Personal Umbrella Liability				Bodily Injury and Property Damage		
				Each Occurrence	\$,00
Farm/Ranch Liability				Farm Liability & Personal Liability	_	
				Each Occurrence	\$,00
				Farm Employer's Liability	_	
				Each Occurrence	\$,00
Workers Compensation and Employers Liability †				Statutory		********
				Each Accident	\$,00,
				Disease - Each Employee	\$,00
				Disease - Policy Limit	\$,00
General Liability				General Aggregate	\$	4,000,000
Commercial General				Products - Completed Operations Aggregate	\$	4,000,000
Liability (occurrence)	05-XJ1984-03	05/25/2023	05/25/2024	Personal and Advertising Injury	\$	2,000,00
<u> </u>				Each Occurrence	\$	2,000,00
				Damage to Premises Rented to You	\$	100,00
				Medical Expense (Any One Person) Each Occurrence ††	\$ \$	5,00
Businessowners Liability Liquor Liability					•	,00
				Aggregate†† Common Cause Limit	\$,000,
				Aggregate Limit	\$ \$,000,
Automobile Liability				Bodily Injury - Each Person	\$,000
☐ Any Auto						
☐ All Owned Autos				Bodily Injury - Each Accident	\$,00
Scheduled Autos				Property Damage	\$,00
 ☐ Hired Auto				Troporty Damage	Ψ	,00
Nonowned Autos				Bodily Injury and Property Damage Combined	\$,00
Excess Liability						
☐ Commercial Blanket Excess	05-XJ1984-04	05/25/2023	05/25/2024	Each Occurrence/Aggregate	\$	2,000,000
Directors and Officers	00-701904-04	03/23/2023	03/23/2024	Each Occurrence/Aggregate	Ψ	2,000,000
Other (Miscellaneous Coverage	es)					
DESCRIPTION OF OPERATIONS / LOCAT	IONS / VERICLES / RESTRICTIONS / SF	ECIAL TIEWS		++ Products-Com	red elected to nder this polic pleted Opera	cy. Have no itions aggregate
				is equal to eac included in po		
CERTIFICATE HOL	DER'S NAME AND ADDRESS	CANCELLATION				
thereof, the co Holder named, upon the comp shown.				uld any of the above described policies be cancelled before the expiration date he company will endeavor to mail *(days) written notice to the Certificate med, but failure to mail such notice shall impose no obligation or liability of any kind company, its agents or representatives. *10 days unless different number of days		
		su	[X] This certifies coverage on the date of issue only. The above described policies are subject to cancellation in conformity with their terms and by the laws of the state of issue.			
		[D/	ATE ISSUED	AUTHORIZED REPRES	CALTATIVE	

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