

**BUSINESSOWNERS POLICY
CONDOMINIUM CERTIFICATE OF INSURANCE**

American Family Mutual Insurance Company
American Family Insurance Company
6000 American Pkwy Madison, WI 53783-0001

Agent's Name, Address

**American Family Insurance
Josh Case Agency, Inc
6841 S Yosemite St Ste 101
Centennial CO 80112**

This Certificate of Insurance is issued as a matter of information only and confers no rights upon the Certificate Holder.

This Certificate of Insurance does not amend, extend or alter the coverage afforded by the policy listed below.

This Certificate does not constitute a contract between the issuing insurer, authorized representative and the certificate holder.

INSURED

CONDOMINIUM ASSOCIATION'S NAME AND ADDRESS
**Woodstream Falls Condominium Association, Inc
9700 E Iliff Ave Denver CO 80231**

POLICY NUMBER	POLICY EFFECTIVE DATE (Mo., Day, Yr.)	POLICY EXPIRATION DATE (Mo., Day, Yr.)
05-XT2120-01	04/30/15	04/30/16

★ PROPERTY

Risks of Direct Physical Loss Named Perils \$ 25,000 Property Deductible

PROPERTY COVERED	VALUATION OF COVERED PROPERTY	LIMIT OF INSURANCE
Building(s) <u>45,641,296</u>	<input checked="" type="checkbox"/> Replacement Cost <input type="checkbox"/> Actual Cash Value	\$ <u>45,641,296.00</u>
Business Personal Property _____	<input type="checkbox"/> Replacement Cost	\$ _____

★ BUSINESSOWNERS LIABILITY AND MEDICAL EXPENSES

COVERAGE	LIMIT OF INSURANCE
Liability And Medical Expenses	
Damage To Premises Rented To You	\$50,000
Medical Expenses - Any One Person	\$5,000
Aggregate Limit (Other Than Products Completed Operations)	\$4,000,000
Products - Completed Operations Aggregate Limit	\$4,000,000

Consult the Condominium Association's policy for insurance afforded Unit Owners.

CERTIFICATE HOLDER(S) _____ Effective Date _____ New Ownership/Occupancy Change Ownership/Occupancy

UNIT OWNER'S NAME AND ADDRESS OR UNIT DESIGNATION NO.
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

UNIT OWNER'S MORTGAGEE NAME AND ADDRESS XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	LOAN NO. XXXXXXXXXXXXXX
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UNIT OWNER'S CONTRACT OF SALES NAME AND ADDRESS XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	LOAN NO. XXXXXXXXXXXXXX
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MISCELLANEOUS
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
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DATE ISSUED 06/10/15	AUTHORIZED REPRESENTATIVE Y. Perez
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