



Mid-Century Insurance Company (A Stock Company)
Member Of The Farmers Insurance Group Of Companies®
Home Office: 6301 Owensmouth Ave., Woodland Hills, CA 91367

COMMON POLICY DECLARATIONS

Named Insured EAST OAKS OWNERS ASSOCIATION

Mailing Address 2100 SUMMER ST NE
STE 280
MINNEAPOLIS, MN 55413-2664

F009088664-001-00001

Account No.

Prod. Count

13-80-381

60680-65-25

Agent No.

Policy Number

Form of Business ☐ Individual ☐ Joint Venture ☐ Limited Liability Co.
☐ Corporation ☐ Partnership ☒ Other Organization

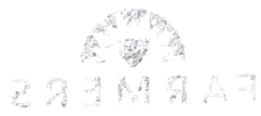
Business Description:
Condominium

Policy Period From 09-01-2024 (not prior to time applied for)
To 09-01-2025 12:01 A.M. Standard time at your mailing address shown above.

If this policy replaces other coverage that ends at noon standard time of the same day this policy begins, this policy will not take effect until the other coverage ends. **This policy will continue for successive policy periods as follows:** If we elect to continue this insurance, we will renew this policy if you pay the required renewal premium for each successive policy period subject to our premiums, rules and forms then in effect.

This policy consists of the following coverage parts listed below and for which a premium is indicated. This premium may be subject to change.

Coverage Parts	Premium After Discount And Modification
Condominiums Owners Policy	\$63,654.00
Directors And Officers Liability	\$989.00
Cyber Liability And Data Breach Expense Coverage	\$35.00
Certified Acts Of Terrorism - See Disclosure Endorsement	Included
Total (See Additional Fee Information Below)	\$64,678.00



Policy Number: 60680-65-25

Effective Date: 09-01-2024

COMMON POLICY DECLARATIONS

Forms Applicable To 25-9230ED3

Reminder-Review Your Coverages

All Coverage Parts:

Named Insured	THE FIRST STATE ASSOCIATION
Mailing Address	110 SUMMIT ST STATION MINNEAPOLIS, MN 55403-3004

Form of Business	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Other
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Policy Period	09-01-2024 to 08-31-2025
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This policy will continue for successive policy periods as follows: (1) If the policy is renewed, the policy will continue for successive policy periods as follows: (2) If the policy is not renewed, the policy will terminate on the date of expiration of the current policy period.

Your Agent

Jason Gallus 14540 Pennock Av #101 Apple Valley, MN 55124 (952) 255-8589	Coverage Parts General Liability Commercial Auto Workers Compensation Disability Insurance
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Countersigned (Date)

By Authorized Representative