<u>ACORD</u> _™			STATEMENT/SCHEDULE OF VALUES											DATE (MM/DD/YY)	
PRODUCE	R			COMPANY NAIC CODE:							P	PAGE			
INSURED/#						PLICA	ICANT							FFECTIVE DATE	
COINS %						APP	LICABLE CAU	ISES OF L	oss		SPECIF			C AVERAGE RATE	
CODE:	CUSTON	IER ID	SUBCODE:		80% 90% 100%		BASIC BROAD SPECIAL	BROAD			FLOOD SPRINKLER LEAKAGE EXCL	BLANKET OTHER:		STED T RATE REQUESTED	
APPLICABLE FORM NUMBERS (Attach completed forms and endorsements that require completion to							OTHER: to provide ned	cessary in	formation	affe	VANDALISM EXCL cting rates or loss costs)			
CLASS CODE	ASS LOC # BLDG DESCRIPTION AND LOCATION			OF PROPERTY			ACV/ RC	SUBJECT 100% VALUES		100% VALUES	RATE OR LOSS COST		PREMIUM		
TOTAL											\$	N	/A	\$	
INSTRUCTIONS								SIGNATURE							
 ACV (Actual Cash Value) or RC (Replacement Cost): If other valuation basis applies, provide necessary information. 							ALL VALUES AND LOCATION INFORMATION ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF								
 SUBJECT: B = Building B = Stock F = Furniture & Fixtures M = Machinery BPP = Your Business Personal Property BI = Business Income R = Rental Income Other - specify 							SIGNATURE: TITLE:								
 RATE OR LOSS COST: For class rated property, attach class rate information form or equivalent information for each location. For specifically rated property, attach specific rate or loss cost information if known. 							DATE:								

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