


Valerie Denson
6317 Harrison Ave.
Hammond, In. 95058180
46324

Address Reply To:
Branch Claim Office:
P.O. Box 6429
South Bend, Indiana 46660-6429

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD
Indiana Insurance
Member The National
95 SE 22 Insurance Companies

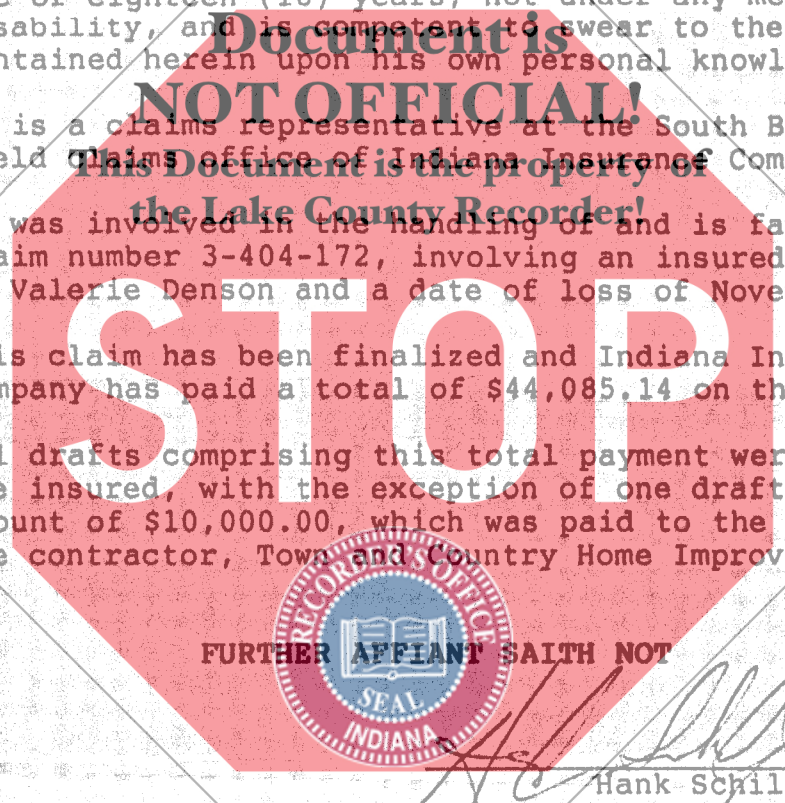


MARGARETTE CLEVELAND
Recorder
115 Park Place Circle
Corporate Park
Mishawaka, Indiana 46545
Phone: (219) 271-0005
Indiana: (800) 533-4601
Fax: (219) 277-7018
Fax: (800) 854-4596

AFFIDAVIT OF HANK SCHILLING

Comes now Hank Schilling, who being duly sworn upon his oath, deposes and says that:

1. He is a citizen of the United States of America, over the age of eighteen (18) years, not under any mental or legal disability, and is competent to swear to the statements contained herein upon his own personal knowledge.
2. He is a claims representative at the South Bend, Indiana, field claims office of Indiana Insurance Company.
3. He was involved in the handling of and is familiar with claim number 3-404-172, involving an insured by the name of Valerie Denson and a date of loss of November 1, 1993.
4. This claim has been finalized and Indiana Insurance Company has paid a total of \$44,085.14 on this claim.
5. All drafts comprising this total payment were paid to the insured, with the exception of one draft in the amount of \$10,000.00, which was paid to the insured and the contractor, Town and Country Home Improvement.



FILED

SEP 25 1995

SAM ORLICH
AUDITOR LAKE COUNTY
State of Indiana)

County of St. Joseph)

Hank Schilling
Hank Schilling

SS:

Subscribed and sworn to me, a Notary Public, in and for said County and State, this 6th day of September, 1995.

Helen Frick
Notary Public

My Commission Expires:
2/24/98

County of Residence: St. Joseph

001445

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