ISSUE DATE IMM/DD/YY) CERTIFICATE OF INSURANCE 09/29/95 ALADE-1 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE Buttrey-Wulff-Mamminga' Agency DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE 355 First St. PO Box 580 POLICIES BELOW. Batavia IL 60510 COMPANIES AFFORDING COVERAGE David F. Mamminga 708-879-0111 COMPANY Casualty Insurance Company LETTER COMPANY American Economy Insurance Co. LETTER INSURED COMPANY C LETTER COMPANY D Alarm Detection Systems, Inc. LETTER Mr. Terry Olah 1100 Church Road COMPANY E Aurora IL 60505 LETTER COVERAGES THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY RECODING ANY REQUIREMENT. TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED ON MAY PERTAIN. THE INSURANCE AREORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERM EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. TYPE OF INSURANCE This Document is the property of GENERAL AGGREGATE GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY PRODUCTS COMP/OP AGG. O the Lake County Recorder! CLAIMS MADE **occur** PERSONAL & ADV. INJURY OWNER'S & CONTRACTOR'S PROT EACH OCCUPRENCE FIRE DAMAGE (Any one fire) MED. EXPENSE (Any one person) 6 **AUTOMOBILE LIABILITY** COMBINED SINGLE +1,000,000 OTUA YHA 02-CC-548992-2 01/21/95 01/21/96 ALL OWNED AUTOS BODILY INJURY (Per person) SCHEDULED AUTOS HIRED AUTOS BODILY INJURY (Per accident) NON-OWNED AUTOS GARAGE LIABILITY PROPERTY DAMAGE EACH OCCURRENCE EXCESS LIABILITY AGGREGATE 0 OTHER THAN UMBRELLA FORM STATUTORY LIMITS 500,000 09/30/96 WORKER'S COMPENSATION WC 95-045383 EACH ACCIDENT AND DISEASE POLICY LIMIT \$500,000 EMPLOYERS HABILITY DISEASE- EACH EMPLOYEE \$500,000 OTHER DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE All Cities, Towns & Municipal-LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR ities of Lake County, Indiana Lake County Government Center LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES. 2293 N. Main BUTTREY-WULFF-MANNINGA AGENCY. AUTHORIZED REPRESENTATIVE Crown Point, IN 46307

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David F. Mamminga By

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