AMERICAN FAMILY MUTUAL INSURANCE COMPANY

MADISON, WISCONSIN 53783-0001

BUSINESSOWNERS POLICY

DECLARATIONS

POLICY NUMBER
48XM742301

CUSTOMER BILLING ACCOUNT
014-221-873 86

NAMED INSURED SHADE TREE COURT CONDOMINIUMS

MAILING ADDRESS C/O DAVE & KATHLEEN MACK
3611 SHADE TREE CT
WAUKESHA, WI 53186

POLICY PERIOD FROM 07-18-2008 TO 07-18-2009
12:01 A.M. Standard Time at your mailing address shown above.

FORM OF BUSINESS PARTNERSHIP

In return for the payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy.

SECTION I PROPERTY

ALL PROPERTY COVERAGES ARE SUBJECT TO THE FOLLOWING:

COVERED CAUSES OF LOSS SPECIAL - RISK OF DIRECT PHYSICAL LOSS

COVERAGE PROVIDED INSURANCE AT THE FOLLOWING DESCRIBED PREMISES ONLY FOR COVERAGES FOR WHICH A LIMIT OF INSURANCE IS SHOWN UNLESS COVERAGE IS PROVIDED BY AN ENDORSEMENT.

DESCRIPTION OF PREMISES

PREMISES NO. 0001 BUILDING NO. 001
LOCATION 3609-11 SHADE TREE COURT WAUKESHA WI 53186

BUILDING INTEREST LEASED TO OTHERS
PREDOMINANT OCCUPANCY CONDOMINIUM BUILDING - RESIDENTIAL WITHOUT MERCANTILE
NUMBER OF UNITS 2
CONSTRUCTION FRAME
YEAR BUILT 2007
COMMERCIAL BUILDING CONSTRUCTION COST INDEX LEVEL 312

CERTIFIED ACTS OF TERRORISM EXCLUSION - FIRE EXCEPTION $2.00

POLICY PROPERTY DEDUCTIBLE $1,000

OTHER PROPERTY DEDUCTIBLE(S)
OPTIONAL COVERAGE/GLASS DEDUCTIBLE $500

COVERAGE	LIMIT OF INSURANCE	PREMIUM
BUILDING REPLACEMENT COST	$376,026	$434.00

AGENT 274-044
JERRY L AUGUSTINE
2514 S 102ND ST
MILWAUKEE, WI 53227-2142

PHONE
414-327-2020

PAGE 0001
BRANCH BKT002 RENW
ENTRY DATE 05-08-2008

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ADDITIONAL COVERAGE	LIMIT OF INSURANCE	PREMIUM
BUSINESS INCOME	ACTUAL LOSS SUSTAINED	INCLUDED

Property forms and endorsements applying to this premises and made part of this policy at time of issue:
Any endorsement followed by a state abbreviation will only apply to coverages within this state.
BP 84 11 07 98

MORTGAGEHOLDER

SUNSET BANK AND SAVINGS
ITS SUCCESSORS AND/OR ASSIGNS
521 W SUNSET DR
WAUKESHA, WI 53189-7015

PREMISE NO.	BUILDING NO.
0001	001

TOTAL ADVANCE PROPERTY PREMIUM $436.00

Property forms and endorsements applying to all premises and made part of this policy at time of issue:
Any endorsement followed by a state abbreviation will only apply to coverages within this state.
BP 06 01 01 07 BP 83 01 07 98 BP 83 02 01 07 BP 85 11 01 07

SECTION II LIABILITY AND MEDICAL EXPENSES

Except for Damage To Premises Rented To You, each paid claim for the following coverages reduces the amount of insurance we provide during the applicable annual period. Please refer to **Section II Liability** in the BUSINESSOWNERS COVERAGE FORM and any attached endorsements.

COVERAGE	LIMIT OF INSURANCE
AGGREGATE LIMIT (OTHER THAN PRODUCTS COMPLETED OPERATONS)	$2,000,000
PRODUCTS-COMPLETED OPERATIONS AGGREGATE LIMIT	$2,000,000
DAMAGE TO PREMISES RENTED TO YOU	$50,000
LIABILITY AND MEDICAL EXPENSES	$1,000,000
PREM 0001 BLDG 001 MEDICAL EXPENSES - ANY ONE PERSON	$5,000

LOCATION	PREMIUM BASIS	RATE	ADVANCE PREMIUM
PREMISES NO. 0001 BUILDING NO. 001	2 UNITS		$10.00

CERTIFIED ACTS OF TERRORISM $1.00

TOTAL ADVANCE BUSINESS LIABILITY PREMIUM $11.00

Liability forms and endorsements applying to all premises and made part of this policy at time of issue:
Any endorsement followed by a state abbreviation will only apply to coverages within this state.
BP 04 17 07 02 BP 04 39 07 02 BP 04 54 01 06 BP 04 93 01 06

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BUSINESSOWNERS POLICY
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CUSTOMER BILLING ACCOUNT
014-221-873 86

BP 05 17 01 06	BP 05 77 01 06	BP 05 98 01 06	BP 10 05 07 02
BP 84 24 01 07	BP 85 04 07 98	BP 85 05 07 98WI	BP 85 10 07 98
BP 85 12 01 06			

TOTAL ADVANCE BUSINESS PREMIUM $447.00

This premium may be subject to adjustment.

Forms and endorsements applying to property and liability at all premises and made part of this policy at time of issue:
Any endorsement followed by a state abbreviation will only apply to coverages within this state.

BP IN 01 01 06	BP 00 03 01 06	BP 01 27 01 06	BP 05 01 07 02
BP 05 15 01 08	BP 05 24 01 08	BP 80 01 01 07	BP 87 01 01 07

AUTHORIZED REPRESENTATIVE — President — Secretary — COUNTERSIGNED LICENSED RESIDENT AGENT

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BP AF 01 09 06

INSURED

Stock No. 15141