



STATE FARM FIRE AND CASUALTY COMPANY
 A STOCK COMPANY WITH HOME OFFICES IN BLOOMINGTON, ILLINOIS

Po Box 2915
 Bloomington IL 61702-2915

RENEWAL DECLARATIONS

Named Insured

AT2 001827 3125 M-05-6812-FB1E F V
 GREEN BAY RIVERSIDE UNIT
 OWNERS ASSOCIATION INC
 118 S WASHINGTON ST
 GREEN BAY WI 54301-4230

| | | |
|---|-----------------------|------------------------|
| Policy Number | 99-B6-X807-4 | |
| Policy Period | Effective Date | Expiration Date |
| 12 Months | NOV 1 2023 | NOV 1 2024 |
| The policy period begins and ends at 12:01 am standard time at the premises location. | | |

Agent and Mailing Address
 OWEN HUBNER
 1901 CROOKS AVE STE A
 KAUKAUNA WI 54130-3200
 PHONE: (920) 949-4177
 (920) 949-4175



Residential Community Association Policy

Automatic Renewal - If the **policy period** is shown as **12 months**, this policy will be renewed automatically subject to the premiums, rules and forms in effect for each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

Entity: Corporation

NOTICE: Information concerning changes in your policy language is included. Please call your agent if you have any questions.

We are required by Wisconsin Law to inform you that if your payment is not received within 12 days after the due date, a notice will be sent stating the effective date of any cancellation for nonpayment.

POLICY PREMIUM \$ 27,744.00

Discounts Applied:
 Renewal Year
 Protective Devices
 Sprinkler
 Claim Record

Prepared
 AUG 21 2023
 CMP-4000

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for GREEN BAY RIVERSIDE UNIT
Policy Number 99-B6-X807-4

SECTION I - PROPERTY SCHEDULE

| Location Number | Location of Described Premises | Limit of Insurance* Coverage A - Buildings | Limit of Insurance* Coverage B - Business Personal Property |
|-----------------|---|---|--|
| 001 | 118 S WASHINGTON ST BLDG A GREEN BAY WI 54301-4230 | \$ 11,287,500 | \$ 41,500 |
| 002 | 118 S WASHINGTON ST BLDG B GREEN BAY WI 54301-4230 | \$ 23,958,300 | \$ 136,900 |

* As of the effective date of this policy, the Limit of Insurance as shown includes any increase in the limit due to Inflation Coverage

SECTION I - INFLATION COVERAGE INDEX(ES)

Inflation Coverage Index: 221.0

SECTION I - DEDUCTIBLES

Basic Deductible \$10,000

Special Deductibles:

Money and Securities \$250 Employee Dishonesty \$250

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for GREEN BAY RIVERSIDE UNIT
Policy Number 99-B6-X807-4

Equipment Breakdown \$2,500



Other deductibles may apply - refer to policy.

SECTION I - EXTENSIONS OF COVERAGE - LIMIT OF INSURANCE - EACH DESCRIBED PREMISES

The coverages and corresponding limits shown below apply separately to each described premises shown in these Declarations, unless indicated by "See Schedule." If a coverage does not have a corresponding limit shown below, but has "Included" indicated, please refer to that policy provision for an explanation of that coverage.

| COVERAGE | LIMIT OF INSURANCE |
|---|---------------------|
| Collapse | Included |
| Damage To Non-Owned Buildings From Theft, Burglary Or Robbery | Coverage B Limit |
| Debris Removal | 25% of covered loss |
| Equipment Breakdown | Included |
| Fire Department Service Charge | \$5,000 |
| Fire Extinguisher Systems Recharge Expense | \$5,000 |
| Glass Expenses | Included |
| Increased Cost Of Construction And Demolition Costs (applies only when buildings are insured on a replacement cost basis) | 10% |
| Newly Acquired Business Personal Property (applies only if this policy provides Coverage B - Business Personal Property) | \$100,000 |
| Newly Acquired Or Constructed Buildings (applies only if this policy provides Coverage A - Buildings) | \$250,000 |
| Ordinance Or Law - Equipment Coverage | Included |
| Preservation Of Property | 30 Days |
| Water Damage, Other Liquids, Powder Or Molten Material Damage | Included |

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for GREEN BAY RIVERSIDE UNIT
Policy Number 99-B6-X807-4

SECTION I - EXTENSIONS OF COVERAGE - LIMIT OF INSURANCE - EACH COMPLEX

The coverages and corresponding limits shown below apply separately to each complex as described in the policy.

| COVERAGE | LIMIT OF INSURANCE |
|--|---------------------------|
| Accounts Receivable | |
| On Premises | \$50,000 |
| Off Premises | \$15,000 |
| Arson Reward | \$5,000 |
| Forgery Or Alteration | \$10,000 |
| Money And Securities (Off Premises) | \$5,000 |
| Money And Securities (On Premises) | \$10,000 |
| Money Orders And Counterfeit Money | \$1,000 |
| Outdoor Property | \$5,000 |
| Personal Effects (applies only to those premises provided Coverage B - Business Personal Property) | \$2,500 |
| Personal Property Off Premises | \$15,000 |
| Pollutant Clean Up And Removal | \$10,000 |
| Property Of Others (applies only to those premises provided Coverage B - Business Personal Property) | \$2,500 |
| Signs | \$2,500 |
| Valuable Papers And Records | |
| On Premises | \$10,000 |
| Off Premises | \$5,000 |

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for GREEN BAY RIVERSIDE UNIT
 Policy Number 99-B6-X807-4



SECTION I - EXTENSIONS OF COVERAGE - LIMIT OF INSURANCE - PER POLICY

The coverages and corresponding limits shown below are the most we will pay regardless of the number of described premises shown in these Declarations.

| COVERAGE | LIMIT OF INSURANCE |
|----------------------------------|-----------------------------------|
| Back-Up of Sewer or Drain | Included |
| Employee Dishonesty | \$100,000 |
| Loss Of Income And Extra Expense | Actual Loss Sustained - 12 Months |

SECTION II - LIABILITY

| COVERAGE | LIMIT OF INSURANCE |
|--|---------------------------|
| Coverage L - Business Liability | \$1,000,000 |
| Coverage M - Medical Expenses (Any One Person) | \$10,000 |
| Damage To Premises Rented To You | \$300,000 |
| AGGREGATE LIMITS | LIMIT OF INSURANCE |
| Products/Completed Operations Aggregate | \$2,000,000 |
| General Aggregate | \$2,000,000 |

Each paid claim for Liability Coverage reduces the amount of insurance we provide during the applicable annual period. Please refer to Section II - Liability in the Coverage Form and any attached endorsements.

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for GREEN BAY RIVERSIDE UNIT
Policy Number 99-B6-X807-4

Your policy consists of these Declarations, the BUSINESSOWNERS COVERAGE FORM shown below, and any other forms and endorsements that apply, including those shown below as well as those issued subsequent to the issuance of this policy.

FORMS AND ENDORSEMENTS

| | |
|------------|---------------------------------|
| CMP-4100 | Businessowners Coverage Form |
| FE-6999.3 | *Terrorism Insurance Cov Notice |
| CMP-4550 | Residential Community Assoc |
| CMP-4746.1 | Hired Auto Liability |
| CMP-4249.2 | Amendatory Endorsement |
| FE-3650 | Actual Cash Value Endorsement |
| CMP-4705.2 | Loss of Income & Extra Expense |
| CMP-4508 | Money and Securities |
| CMP-4710 | Employee Dishonesty |
| CMP-4543 | AI Design Person Org |
| CMP-4561.4 | Policy Endorsement |
| FD-6007 | Inland Marine Attach Dec |
| | * New Form Attached |

SCHEDULE OF ADDITIONAL INTERESTS

Interest Type: Addl Insured-Section II
Endorsement #: CMP4543
Loan Number: N/A

WASHINGTON SQUARE GREEN BAY
LLC
345 W WASHINGTON AVE STE 301
MADISON WI 537033007

Interest Type: Addl Insured-Section II
Endorsement #: CMP4543
Loan Number: N/A

CITY OF GREEN BAY
100 N JEFFERSON ST
GREEN BAY WI 543015026

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for GREEN BAY RIVERSIDE UNIT
Policy Number 99-B6-X807-4



This policy is issued by the State Farm Fire and Casualty Company.

Participating Policy

You are entitled to participate in a distribution of the earnings of the company as determined by our Board of Directors in accordance with the Company's Articles of Incorporation, as amended.

In Witness Whereof, the State Farm Fire and Casualty Company has caused this policy to be signed by its President and Secretary at Bloomington, Illinois.

Lynne M. Yourell
Secretary

Michael J. Tignor
President

NOTICE TO POLICYHOLDER:

For a comprehensive description of coverages and forms, please refer to your policy. Policy changes requested before the "Date Prepared", which appear on this notice, are effective on the Renewal Date of this policy unless otherwise indicated by a separate endorsement, binder, or amended declarations. Any coverage forms attached to this notice are also effective on the Renewal Date of this policy. Policy changes requested after the "Date Prepared" will be sent to you as an amended declarations or as an endorsement to your policy. Billing for any additional premium for such changes will be mailed at a later date. If, during the past year, you've acquired any valuable property items, made any improvements to insured property, or have any questions about your insurance coverage, contact your State Farm agent. Please keep this with your policy.

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RENEWAL DECLARATIONS (CONTINUED)

Residential Community Association Policy for GREEN BAY RIVERSIDE UNIT
Policy Number 99-B6-X807-4

Your coverage amount...

It is up to you to choose the coverage and limits that meet your needs. We recommend that you purchase a coverage limit equal to the estimated replacement cost of your structure. Replacement cost estimates are available from building contractors and replacement cost appraisers, or, your agent can provide an estimate from Xactware, Inc.[®] using information you provide about your structure. We can accept the type of estimate you choose as long as it provides a reasonable level of detail about your structure. State Farm[®] does not guarantee that any estimate will be the actual future cost to rebuild your structure. Higher limits are available at higher premiums. Lower limits are also available, as long as the amount of coverage meets our underwriting requirements. We encourage you to periodically review your coverages and limits with your agent and to notify us of any changes or additions to your structure.

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STATE FARM FIRE AND CASUALTY COMPANY
 A STOCK COMPANY WITH HOME OFFICES IN BLOOMINGTON, ILLINOIS

Po Box 2915
 Bloomington IL 61702-2915

Named Insured

M-05-6812-FB1E F V

**GREEN BAY RIVERSIDE UNIT
 OWNERS ASSOCIATION INC
 118 S WASHINGTON ST
 GREEN BAY WI 54301-4230**



INLAND MARINE ATTACHING DECLARATIONS

| | | |
|---|-----------------------|------------------------|
| Policy Number | 99-B6-X807-4 | |
| Policy Period | Effective Date | Expiration Date |
| 12 Months | NOV 1 2023 | NOV 1 2024 |
| The policy period begins and ends at 12:01 am standard time at the premises location. | | |

0506-ST-0001

ATTACHING INLAND MARINE

Automatic Renewal - If the **policy period** is shown as **12 months**, this policy will be renewed automatically subject to the premiums, rules and forms in effect for each succeeding policy period. If this policy is terminated, we will give you and the Mortgagee/Lienholder written notice in compliance with the policy provisions or as required by law.

Annual Policy Premium \$ 1,875.00

The above Premium Amount is included in the Policy Premium shown on the Declarations.

Your policy consists of these Declarations, the INLAND MARINE CONDITIONS shown below, and any other forms and endorsements that apply, including those shown below as well as those issued subsequent to the issuance of this policy.

Forms, Options, and Endorsements

- FE-8739 Inland Marine Conditions
- FE-8266 Amendatory Endorsement
- FE-8743.1 Inland Marine Computer Prop
- FE-8759 Miscellaneous Articles End

See Reverse for Schedule Page with Limits

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 FD-6007

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ATTACHING INLAND MARINE SCHEDULE PAGE

ATTACHING INLAND MARINE

| ENDORSEMENT NUMBER | COVERAGE | LIMIT OF INSURANCE | DEDUCTIBLE AMOUNT | ANNUAL PREMIUM |
|-------------------------------|--|-------------------------|----------------------|-------------------------|
| FE-8743.1 | Inland Marine Computer Prop | \$ 10,000 | \$ 500 | Included |
| FE-8759 | Loss of Income and Extra Expense Miscellaneous Articles End | \$ 10,000 \$ 125,000 | \$ 1,000 | Included \$ 1,875.00 |
| DESCRIPTION OF PROPERTY: PIER | | | | |

OTHER LIMITS AND EXCLUSIONS MAY APPLY - REFER TO YOUR POLICY

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In accordance with the Terrorism Risk Insurance Act of 2002 as amended and extended by the Terrorism Risk Insurance Program Reauthorization Act of 2019, this disclosure is part of your policy.

POLICYHOLDER DISCLOSURE NOTICE OF TERRORISM INSURANCE COVERAGE

Coverage for acts of terrorism is not excluded from your policy. However your policy does contain other exclusions which may be applicable, such as an exclusion for nuclear hazard. You are hereby notified that the Terrorism Risk Insurance Act, as amended in 2019, defines an act of terrorism in Section 102(1) of the Act. The term "act of terrorism" means any act that is certified by the Secretary of the Treasury—in consultation with the Secretary of Homeland Security, and the Attorney General of the United States—to be an act of terrorism; to be a violent act or an act that is dangerous to human life, property, or infrastructure; to have resulted in damage within the United States, or outside the United States in the case of certain air carriers or vessels or the premises of a United States mission; and to have been committed by an individual or individuals as part of an effort to coerce the civilian population of the United States or to influence the policy or affect the conduct of the United States Government by coercion. Under this policy, any covered losses resulting from certified acts of terrorism may be partially reimbursed by the United States Government under a formula established by the Terrorism Risk Insurance Act, as amended. Under the formula, the United States Government generally reimburses 80% beginning on January 1,

2020 of covered terrorism losses exceeding the statutory established deductible paid by the insurance company providing the coverage. The Terrorism Risk Insurance Act, as amended, contains a \$100 billion cap that limits U.S. Government reimbursement as well as insurers' liability for losses resulting from certified acts of terrorism when the amount of such losses exceeds \$100 billion in any one calendar year. If the aggregate insured losses for all insurers exceed \$100 billion, your coverage may be reduced.

There is no separate premium charged to cover insured losses caused by terrorism. Your insurance policy establishes the coverage that exists for insured losses. This notice does not expand coverage beyond that described in your policy.

THIS IS YOUR NOTIFICATION THAT UNDER THE TERRORISM RISK INSURANCE ACT, AS AMENDED, ANY LOSSES RESULTING FROM CERTIFIED ACTS OF TERRORISM UNDER YOUR POLICY MAY BE PARTIALLY REIMBURSED BY THE UNITED STATES GOVERNMENT AND MAY BE SUBJECT TO A \$100 BILLION CAP THAT MAY REDUCE YOUR COVERAGE.

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