



State Farm  
Specialty Products

Telephone: (866)737-6877  
Facsimile: (312)381-7339

## BINDER OF INSURANCE

Page: 1 of 3

PER THE TERMS OF THIS DOCUMENT - COVERAGE IS IN FORCE AND PREMIUM IS BEING EARNED

**1. Delivered To:** MICHAEL A TRUJILLO  
MICHAEL A TRUJILLO STATE FARM AGENCY  
2019 S TOWNSEND  
MONTROSE, CO 81401-5444

**Producer Code #:** 062211

Coverage is bound pursuant to the following terms and conditions:

**2. Parent Organization:** SAN JUAN RANCH HOMEOWNERS ASSOCIATION  
  
C/O FULL CIRCLE HOA MANAGEMENT  
560 MOUNTAIN VILLAGE BLVD. SUITE 102A  
MOUNTAIN VILLAGE, CO 81435

**Client Code #:** 0000131124

**3. Binder Period:** This binder expires automatically on the date stated unless extended in writing by State Farm Specialty Products or unless superceded by the Policy or Renewal Declarations.

Binder Effective Date: April 17, 2007 Binder Expiration Date: July 17, 2007  
12:01 A.M. standard time at the address of the **Parent Organization** as shown above.

**4. Policy Provisions:** The Policy or Renewal Declarations will be issued to incorporate the following provisions, provided all conditions of this binder have been met.

Policy #: PS 0000001294700

Policy Period: From: April 17, 2007 To: April 17, 2008  
12:01 A.M. standard time at the address of the **Parent Organization** as shown above.

Insurer: STATE FARM FIRE AND CASUALTY COMPANY

Program: NOT FOR PROFIT D & O INCLUDING EPLI

Coverage Type: Claims - Made Defense Costs: Outside The Limit

**Limit of Liability  
In the Aggregate**

\$ 1,000,000

**Retention  
Each Claim**

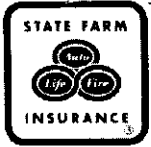
\$ 1,000

**5. Premium Payment & Terms:** (Invoice to Follow Under Separate Cover)

Premium Payment Plan: 100% AT INCEPTION

Policy Period Premium: \$ 990

Total Premium: \$ 990.00



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## BINDER OF INSURANCE

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**6. Schedule:**

Not Applicable

**7. Applicable Forms & Endorsements:**

PSNP1000(07/01)	Declarations Page
PSNP1001(01/01)	Not-For-Profit Organization Liability Policy Including EPLI
PSNP1026CO(12/01)	Colorado Amendatory Endorsement
PSNP1030(12/03)	Condominium and Homeowners Association Endorsement
PSNP1031(12/03)	Property Manager Endorsement

**8. Special Conditions:**

Not Applicable

**9. Subject to our receipt & approval of the following requirements:**

Not Applicable

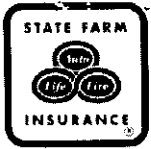
This binder requires payment of premium to State Farm Specialty Products, at the location listed on the invoice, on the premium due date shown in the invoice. This binder may be cancelled if payment is not received by the premium due date on the invoice.

In the event of cancellation or expiration of this binder without a Policy or Renewal Declarations Page being issued, the Insurer shall be entitled to an earned premium for the time in force as calculated by the Insurer in accordance with the provisions of the applicable specimen policy or expiring policy.

Date: May 7, 2007

By:

Authorized Representative



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Specialty Products**

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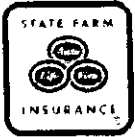
## **BINDER OF INSURANCE**

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**Applicable Forms & Endorsements, Continued:**

PS1039(02/03)

Policyholder Disclosure Notice of Terrorism Coverage



**State Farm Fire and Casualty Company**  
A Stock Company with Home Offices in Bloomington, Illinois  
Herein called the **Insurer**

## DECLARATIONS PAGE

### NOT-FOR-PROFIT ORGANIZATION LIABILITY POLICY INCLUDING EMPLOYMENT PRACTICES LIABILITY COVERAGE

Policy No: PS 0000001294700  
Renewal of Policy No:

NOTICE: THIS IS A CLAIMS-MADE POLICY. THIS POLICY, SUBJECT TO ITS TERMS, APPLIES ONLY TO **CLAIMS** FIRST MADE DURING THE **POLICY PERIOD** OR ANY EXTENDED REPORTING PERIOD THAT MAY APPLY.

This Declarations Page along with the completed and signed **Application** including attachments, and the Policy Form and Endorsements listed in Item 6., shall constitute the contract between the **Insureds** and the **Insurer**.

Item 1. **Parent Organization:** SAN JUAN RANCH HOMEOWNERS ASSOCIATION

Address: C/O FULL CIRCLE HOA MANAGEMENT  
560 MOUNTAIN VILLAGE BLVD. SUITE 102A  
MOUNTAIN VILLAGE, CO 81435

Item 2. **Policy Period:**  
Effective Date: April 17, 2007                      Expiration Date: April 17, 2008  
(12:01 A.M. Standard Time at the Address stated in Item 1.)

Item 3. **Limit of Liability:**                      \$ 1,000,000                      in the Aggregate.

Item 4. **Retention:**                                      \$ 1,000                      each **Claim**.

Item 5. **Premium:**                                      \$ 990

Item 6. Policy Form and endorsements made part of this Policy at the time of issuance:

PSNP1001(01/01)	Not-For-Profit Organization Liability Policy Including EPLI
PSNP1026CO(12/01)	Colorado Amendatory Endorsement
PSNP1030(12/03)	Condominium and Homeowners Assoc Endorsement
PSNP1031(12/03)	Property Manager Endorsement
PSNP1035CO(01/02)	Colorado Disclosure Form
PS1039(02/03)	Policyholder Disclosure Notice of Terrorism Coverage

Item 7. Notices to the **Insurer** - All notices to the **Insurer** pertaining to this Policy must be sent to:

State Farm Specialty Products  
200 East Randolph Street  
Chicago, IL 60601

Date of Issue: May 7, 2007

By   
Authorized Representative