



STATE FARM FIRE AND CASUALTY COMPANY

1440 GRANVILLE ROAD NEWARK OH 43093

NAMED INSURED

POLICY NUMBER S03 3130-C18-

BARKER, AARON & LORIANN
PO BOX 316
MAGNOLIA OH 44643-0316

POLICY PERIOD MAR 18 1999 TO SEP



STATE FARM PAYME
NUMBER 03725588

DESCRIBED VEHICLE	YEAR	MAKE	MODEL	BODY STYLE	VEHICLE IDENTIFICATION NUMBER
	1989	FORD	FESTIVA	2DR	KNJBTO6K6K6166495

COVERAGES (AS DEFINED IN POLICY)
SYMBOL-PREMIUM-COVERAGE NAME-LIMITS OF LIABILITY

A \$336.00 BODILY INJURY/PROPERTY DAMAGE LIABILITY
LIMITS OF LIABILITY-COVERAGE A-BODILY INJURY
EACH PERSON, EACH ACCIDENT
100,000 300,000

C \$68.60 MEDICAL PAYMENTS
LIMIT OF LIABILITY-COVERAGE C
EACH PERSON
50,000

U \$39.40 UNINSURED MOTOR VEHICLE
LIMITS OF LIABILITY-U
EACH PERSON, EACH ACCIDENT
100,000 300,000

U1-250 \$8.60 UNINSURED MOTOR VEHICLE PROPERTY DAMAGE - COVERAGE

\$452.60 TOTAL PREMIUM FOR POLICY PERIOD MAR 18 1999 TO SEP 1

GUARANTEE PERIOD MAR 18 1999 TO MAR 18 2001 SUBJECT TO CONDITIONS 4 AN

EXCEPTIONS AND ENDORSEMENTS

RESIDENCE-160 S BRADY ST, MAGNOLIA OH 44643.

Ken Jones
900 Strong St
CPG 2998

IS YOUR DECLARATIONS PAGE
PART OF YOUR AUTO POLICY BOOKLET.

AGENT: DAVE EARLY
PHONE: (330) 477-8529

OF THIS PAGE, ANY ENDORSEMENTS, AND THE POLICY BOOKLET, FORM

9935.7

PLEASE KEEP TOGETHER

FIRE OVL