



EVIDENCE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY) 12/12/2017

THIS EVIDENCE OF PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

	UTHORIZED REPRESENTATIVE OF						IUIEA	CONTRACT	BEIWEEN IHE	
AGENCY	COMPANY									
Carr Insurance Agency, Inc. 255 N Main St. Centerville, OH 45459			Erie Insurance Exchange 100 Erie Insurance Place Erie, PA 16530							
FAX (A/C, No): (937) 435-5939	E-MAIL ADDRESS: insurance@carragency.com	n								
CODE: GG4017	SUB CODE:									
AGENCY CUSTOMER ID #: KILWCHO-0										
INSURED Mahlerwein Enterprise LLC dba Kilwins 4391 Holly Ln Beavercreek, OH 45440			LOAN NUMBER				POLICY NUMBER Q97-0972846			
			EFFECTIVE DATE EXPIRATIO 5/1/2017 5/1/20			IRATION D. 5/1/2018				
			THIS REPLACES PRIOR EVIDENCE DATED:							
PROPERTY INFORMATION)N									
LOCATION/DESCRIPTION	Ln, Beavercreek, OH 45440-3290									
NOTWITHSTANDING ANY EVIDENCE OF PROPERT	RANCE LISTED BELOW HAVE BEI REQUIREMENT, TERM OR CONI Y INSURANCE MAY BE ISSUED O RMS, EXCLUSIONS AND CONDITION	DITION OF A	ANY CONTRA FAIN, THE INS	CT OR OTI URANCE AF	HER DO	DCUMEN D BY TH	T WITH	I RESPECT TO	O WHICH THIS BED HEREIN IS	
COVERAGE INFORMATION	ON PERILS INSURED	BASIC	BROAD	SPECIA	,					
	COVERAGE / PERILS /		BITOAD	OI LOIA	.L	<u>' </u>	AMOUNT (OF INSURANCE	DEDUCTIBLE	
Medical expense (per perso Loc # 1, Bldg # 1 Building Personal Property	on) Limit							\$5,000 \$185,000 \$215,000		
REMARKS (Including Sp	ecial Conditions)									
Special Conditions: Income Protection & Extra E 30 Day Notice of Cancellation Wind/Hail Coverage Replacement Cost Spoilage Coverage up to \$2	Expense-ALS 12 Months on GU128									
CANCELLATION										
	E ABOVE DESCRIBED POLICIED PANCE WITH THE POLICY PROVISI		CELLED BEF	ORE THE	EXPIRA	ATION D	ATE TI	HEREOF, NO	TICE WILL BE	
ADDITIONAL INTEREST										
NAME AND ADDRESS	ADDITIONAL INSURED LENDER'S LOSS PAYABLE LOSS PAYEE MORTGAGEE LOAN #									
Kilwins Cha	ocolates Franchise Inc.		ALITHOPIZED	EDDECENTATI	VE					
Kilwin's Quality Confections Inc. 1050 Bay View Road Petoskey, MI 49770				Kuly Youker						