



AMERICAN STATES INSURANCE COMPANY OF TEXAS

SEATTLE, WASHINGTON  
COMMERCIAL INSURANCE POLICY

NAMED INSURED AND MAILING ADDRESS  
RAY JONES  
PO BOX 565  
MERCEDES, TX 78570

RENEWAL DECLARATIONS

POLICY NUMBER 04-FR-005304-4  
RENEWAL OF 04-FR-005304-3 11-98

SEE NAMED INSURED EXTENSION

POLICY PERIOD FROM 11-20-11 TO 11-20-12 12:01 AM  
STANDARD TIME AT LOCATION SHOWN ABOVE.

AGENT NAME AND ADDRESS  
MC AFEE AGENCY  
PO BOX 625  
MERCEDES, TX 78570

4252847 (956) 565-2481

THE TOTAL PREMIUM DUE FOR THE POLICY TERM IS \$500.00.  
YOU WILL BE BILLED THROUGH YOUR CUSTOMER ACCOUNT #828-7548-860-01.  
YOU NEED NOT PAY ANY PREMIUM AT THIS TIME. WE WILL SEND A BILLING STATEMENT IN A SEPARATE MAILING.

IN RETURN FOR THE PAYMENT OF THE PREMIUM, AND SUBJECT TO ALL THE TERMS OF THIS POLICY, THE COMPANIES INDICATED ON THE SPECIFIC COVERAGE PART DECLARATIONS AGREE WITH YOU TO PROVIDE THE INSURANCE AS STATED IN THIS POLICY.

COMMERCIAL FARM COVERAGE PART .....	\$	500.00
		<u>500.00</u>

*updated copy of Insurance coverage*

AUTHORIZED

10-14-11 (DATE) BY ROBERT GARZA (AUTHORIZED REPRESENTATIVE)





**NAMED INSURED EXTENSION  
AMERICAN STATES INSURANCE COMPANY OF TEXAS  
SEATTLE, WASHINGTON**

**POLICY NUMBER: 04-FR-005304-4**

The following is a complete list of the named Insureds:

**RAY JONES**

USA



9-CC(0207)

COMPANY USE ONLY

ADDLNAMINS080461

Safeco and the Safeco logo are registered trademarks of Safeco Corporation

NORTHEAST

26 (DENWAT) PREPARED 10-14-11



FARM LIABILITY COVERAGE PART DECLARATIONS

NAMED INSURED RAY JONES
FORM OF BUSINESS: INDIVIDUAL

POLICY NO. 04-FR-005304-4

COVERAGE IS PROVIDED ONLY WHERE A LIMIT OF LIABILITY IS SHOWN FOR THE COVERAGE.

Table I: Limits of Liability. Columns include Coverage (H, I, J), Description (e.g., Bodily Injury and Property Damage Liability), Amount (\$500,000, \$50,000, \$5,000), and Limit Type (General Aggregate, Each Occurrence, Any One Fire, Any One Person).

Table II: Location of Insured Premises. Columns include Loc No., Description (LOT 13, BLK 40 & LOT 9, BLK 67 S/E OF MERCEDES, HIDALGO CO, TX), No. of Acres (86.84), and No. of Dwellings.

Table III: Coverages. Lists A. Basic Premium and B. Optional Premiums (Insured Farm Employees - Employers Liability and Medical Payments, Full-time farm employees, Part-time farm employees, Custom Farming, Additional Dwellings, Additional Interests, Other Coverages) with a Premium of \$500.00.

Forms Applicable:

FLO020(0680) FARM LIABILITY COVERAGE FORM
FLO105(1187) TEXAS CHANGES
ILO168(0101) TEXAS CHANGES - DUTIES

FLO163(1088) AMENDATORY ENDORSEMENT
ILO275(1001) TX CHANGES - CANCELLATION & N
ILO017(1198) COMMON POLICY CONDITIONS

855

