

SWORN STATEMENT IN PROOF OF LOSS

(For Use With Replacement Cost Coverages)

\$10,000,000.00
AMOUNT OF POLICY AT TIME OF LOSS
12/31/2017
DATE ISSUED
12/31/2018
DATE EXPIRES

NOJY45113017
CERTIFICATE NUMBER
New York, NY
BROKER AT
Swett & Crawford
BROKER

To the Certain Underwriters at Lloyd's, London
of _____
At time of loss, by the above indicated policy of insurance you insured Hidalgo County

against loss by Flood to the property described under Schedule "A," according to the terms and conditions of the said policy and all forms, endorsements, transfers and assignments attached thereto.

1. Time and Origin: Flood loss occurred about the hour of _____ o'clock on the 19 day of Jun-18. The cause and origin of the said loss were: Flood

2. Occupancy: The building described, or containing the property described, was occupied at the time of the loss as follows, and for no other purpose whatever: Municipality

3. Title and Interest: At the time of the loss the interest of your insured in the property described therein was Owner. No other person or persons had any interest therein or encumbrance thereon, except: None

4. Changes: Since the said policy was issued there has been no assignment thereof, or change of interest, use, occupancy, possession, location or exposure of the property described, except: NONE KNOWN

5. Total Insurance: The total amount of insurance upon the property described by this policy was, at the time of the loss, \$10,000,000.00 as more particularly specified in the apportionment attached under the Declarations, besides which there was no policy or other contract of insurance, written or oral, valid or invalid.

6. Undisputed RCV	\$	1,089,835.48
7. Less Depreciation	\$	286,088.88
8. Actual Cash Value	\$	803,746.60
9. Less Deductible and Prior Payments	\$	(600,000.00)
10. Net Unallocated Advance	\$	203,746.60

11. Supplemental Claim, to be filed in accordance with the terms and conditions of the Replacement Cost Coverage within N/A days from the date of loss as shown above, will not exceed \$ 286,088.88
London's 12.5% \$ 25,468.33

The said loss did not originate by any act, design or procurement on the part of your insured, or this affiant; nothing has been done by or with the privity or consent of your insured or this affiant, to violate the conditions of the policy, or render it void; no articles are mentioned herein or in annexed schedules but such as were destroyed or damaged at the time of said loss; no property saved has in any manner been concealed, and no attempt to deceive the said company, as to the extent of said loss, has in any manner been made. Any other information that may be required will be furnished and considered a part of this proof. The furnishing of this blank or the preparation of proofs by a representative of the above insurance company is not a waiver of any of its rights.

State of Texas X _____
County of Hidalgo X _____
Subscribed and sworn to before me this 20th day of October 20 18 THE INSURED

Monica Salinas Notary Public



Hidalgo County
 2818 S Bus Hwy 281
 Edinburg, TX 78539

SEDGWICK

1833 CENTRE POINT CIRCLE
 SUITE 139
 NAPERVILLE, IL 60563
 PH 630-245-7000
 FAX 630-245-1920

VENDOR NO.
 0I0003LTB

DATE
 11/28/18

CHECK NO.
 207517

INVOICE NUMBER & DESCRIPTION	INVOICE DATE	OUR REFERENCE	GROSS AMOUNT
Claim payment		HOU18434800	\$25,468.25
MIDWEST TRUST ACCOUNT			TOTAL \$25,468.25

THIS MULTI-TONE ARE A OF THE DOCUMENT CHANGES COLOR GRADUALLY AND EVENLY FROM DARK TO LIGHT WITH DARKER AREAS BOTH TOP AND BOTTOM.

SEDGWICK
 1833 CENTRE POINT CIRCLE
 SUITE 139
 NAPERVILLE, IL 60563

FIFTH THIRD BANK
 CHICAGO, ILLINOIS
 70-2390
 719

CHECK NO. 207517

PAY TO THE ORDER OF
 ONLY FIVE THOUSAND FOUR HUNDRED SIXTY EIGHT DOLLARS AND TWENTY FIVE CENTS

DATE 11/28/18
 AMOUNT *\$25,468.25

■ TWENTY-FIVE THOUSAND FOUR HUNDRED SIXTY-EIGHT DOLLARS AND TWENTY-FIVE CENTS ***

VOID AFTER 180 DAYS

MIDWEST TRUST ACCOUNT

PAY TO THE ORDER OF Hidalgo County
 2818 S Bus Hwy 281
 Edinburg, TX 78539

Marty Jankowski
 AUTHORIZED SIGNATURE
 AUTHORIZED SIGNATURE

VOID OVER \$25,468.25

COPY BANK ANTI-FRAUD PROTECTION

THE ORIGINAL DOCUMENT HAS A REFLECTIVE WATERMARK ON THE BACK. HOLD AT AN ANGLE TO VIEW WHEN CHECKING THE ENDORSEMENTS.

⑈ 207517⑈ ⑆071923909⑆ 7233891915⑈