
OTTOSEN BRITZ KELLY COOPER GILBERT & DiNOLFO, LTD.

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June 9, 2011

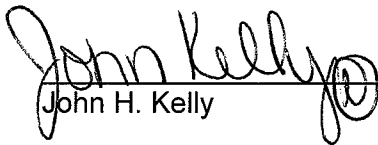
Ms. Barbara Allen
Lake County Board Office
18 North County Street; 10th Floor
Waukegan, Illinois 60085-4351

**Re: Appointment of Frank Wolowic
Countryside Fire Protection District**

Dear Ms. Allen:

Thank you for your letter informing the Countryside Fire Protection District of the reappointment of President Frank Wolowic. I have enclosed a copy of the applicable portion of the District's insurance policy showing the required coverage and bond. Should you require any additional information please do not hesitate to contact us.

Sincerely,


John H. Kelly

JHK:eo

Enclosure



Date: 12/20/2010

Summary of Coverage For:

Countryside Fire Protection District
600 North Deerpath Drive
Vernon Hills, IL 60061

<p>Presented By: Emergency Service Organizations Ins. Agency, Inc. 705 Thunderbird P.O. Box 428 Rantoul, IL 61866 Phone: (217) 893-1138 Fax: (217) 893-1189</p>	<p>Emergency Services Insurance Program Offered by McNeil & Company, Inc. P.O. Box 5670 20 Church Street Cortland, NY 13045 Phone: (800) 822-3747 Fax: (607) 756-5051 Website: www.esip.com</p>
<p>Carrier: Arch Insurance Company A.M. Best Rating: A (Excellent)</p>	

CRIME

Limits of Insurance

Employee Theft

Blanket Limit \$10,000

Deductible \$0

Covers All

Employees

Volunteers

Board Members

Treasurers

Position Schedule

Deductible \$0

President (1) \$300,000

Secretary (1) \$300,000

Treasurer (1) \$300,000

Business Manager (1) \$300,000

Fire Chief (1) \$300,000

Faithful Performance of Duty

Forgery or Alteration

Limit \$10,000

Deductible \$0

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

EMPLOYEE THEFT NAME OR POSITION SCHEDULE

This endorsement modifies insurance provided under the following:

COMMERCIAL CRIME COVERAGE FORM
 COMMERCIAL CRIME POLICY
 EMPLOYEE THEFT AND FORGERY POLICY
 GOVERNMENT CRIME COVERAGE FORM
 GOVERNMENT CRIME POLICY
 GOVERNMENT EMPLOYEE THEFT AND FORGERY POLICY

SCHEDULE

<input type="checkbox"/> Name Schedule Coverage			
Item No.	Names Of Covered Employees	Limit Of Insurance On Each Employee	Deductible Amount On Each Employee
		\$	\$
		\$	\$
		\$	\$

<input checked="" type="checkbox"/> Position Schedule Coverage					
Item No.	Titles Of Covered Positions	Location Of Covered Positions	Number Of Employees In Each Position	Limit Of Insurance On Each Employee	Deductible Amount On Each Employee
1	President	Mundelein, IL	1	\$300,000	N/A
2	Secretary	Mundelein, IL	1	\$300,000	N/A
3	Treasurer	Mundelein, IL	1	\$300,000	N/A
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.					