



SUPPLEMENTAL SCHEDULE

Location of *Insured Premises* _____

We cover only the following classes or items of property for which a specific limit of liability is shown. *Our* liability shall not exceed such limit This coverage is subject to the *terms* of the policy applying to Coverage A, Coverage B, Coverage C and Coverage D.

Fire or Lightning, Explosion		Extended Coverage	EXTENDED COVERAGE APPLIES ONLY IF AN AMOUNT OF INSURANCE IS LISTED FOR EACH ITEM. THE EXTENDED COVERAGE PERILS ARE LISTED ON FORM FL-1	
Item No	Limit of Liability	Limit of Liability		
1.	\$ _____	\$ _____	On _____	
2.	\$ _____	\$ _____	On _____	
3.	\$ _____	\$ _____	On _____	
4.	\$ _____	\$ _____	On _____	
5.	\$ _____	\$ _____	On _____	
6.	\$ _____	\$ _____	On _____	
7.	\$ _____	\$ _____	On _____	
8.	\$ _____	\$ _____	On _____	
9.	\$ _____	\$ _____	On _____	
10.	\$ _____	\$ _____	On _____	
11.	\$ _____	\$ _____	On _____	
12.	\$ _____	\$ _____	On _____	
13.	\$ _____	\$ _____	On _____	
14.	\$ _____	\$ _____	On _____	
15.	\$ _____	\$ _____	On _____	
16.	\$ _____	\$ _____	On _____	
17.	\$ _____	\$ _____	On _____	
18.	\$ _____	\$ _____	On _____	
19.	\$ _____	\$ _____	On _____	
20.	\$ _____	\$ _____	On _____	
	\$ _____	\$ _____	Total Amount of Insurance	