

November 7, 2019

Benjamin L Johnson 6908 Barberry Ln Eden Prairie MN 55346-3536 State Farm Claims PO Box 106169 Atlanta GA 30348-6169

RE:

Claim Number:

23-2090-G83

Date of Loss: Our Insured: November 16, 2017 Brent Gordon Johnson

Policy Number:

93BTX5828

Dear Benjamin L Johnson:

Enclosed is a claim payment of \$100,654.38. This payment is for the replacement cost benefits for the structural damage claim of Brent Johnson and Judy Caravalho.

Please see the summary of loss that I emailed to you on 11/7/19 which shows a breakdown of how this payment was calculated.

Sincerely,

Ryan Rud Claim Specialist (844) 458-4300 Ext. 3099942186

State Farm Fire and Casualty Company

Enclosure(s): draft

PAYMENT NO 1 05 796777 J PAYMENT AMOUNT \$100.654.38 ISSUE DATE 11-07-2019 AUTHORIZED BY RUD, RYAN PHONE (844) 458-4300

CLAIM NO 23-2090-G83 LOSS DATE 11-16-2017 POLICY NO 93-BTX582-8 INSURED CARAVALHO, JUDY LEE MARIE &

BENJAMIN L. JOHNSON 6908 BARBERRY LN EDEN PRAIRIE MN 55346-3536

REMARKS

replacement cost benefits- structure

COVERAGE DESCRIPTION FIRE OR LIGHTNING - BUILDING ON BEHALF OF CARAVALHO, JUDY LEE MARIE &

AMOUNT 100,654.38

RETAIN STUB FOR RECORDS

State FARM FIRE AND CASUALTY COMPANY

US BANK, NA 75-1592/912

PROXIMITY OFFICE PCQ2716.P27F

ST. PAUL, MN

CLAIM NO 23-2090-G83 LOSS DATE 11-16-2017

INSURED CARAVALHO, JUDY LEE MARIE &

********EXACTLY ONE HUNDRED THOUSAND SIX HUNDRED FIFTY-FOUR AND 38/100 DOLLARS

\$***100,654.38

DATE

11-07-2019

MM DD YYYY

Pay to the

Order of: JUDY LEE MARIE CARAVALHO & BRENT GORDON JOHNSON & BENJAMIN L. JOHNSON

GREEN COLORED BACKGROUND IS MISSING AUTHORIZED SIGNATURE

MUST BE ENDORSED BY ALL PAYEES

By endorsing this payment for your services, you agree not to use or disclose any personal customer information received from us unless necessary for the services we requested.