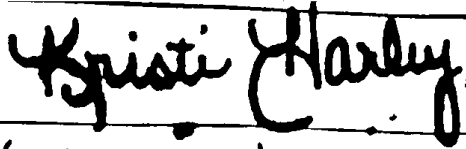


Date Produced: 11/25/2013

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Signature of Recipient :

| | |
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| ire |  |
| d | Kristi Harley |

Address of Recipient :

| | |
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| ry is | State Farm Ins 21701.05.09 |
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