

## ALTA SHORT FORM RESIDENTIAL LIMITED COVERAGE JUNIOR LOAN POLICY Issued By WFG NATIONAL TITLE INSURANCE COMPANY

Transaction Identification Data, for which the Compa incorporated below: Issuing Agent: Issuing Office: Issuing Office's ALTA® Registry ID: Loan ID Number: Issuing Office File Number: Property Address:	ny assumes no liability as set forth in Condition 9.e. of the policy form
Florida Corporation, (the "Company,") insures the In Amount of Insurance, as provided by and subject to	dum attached, WFG NATIONAL TITLE INSURANCE COMPANY, a sured as of Date of Policy against loss or damage, not exceeding the the terms, Exclusions from Coverage and Conditions set forth in the ted Coverage Junior Loan Policy (04-02-2022), all of which are edule refer to the Schedule in this policy.
This policy, when issued by the Company with a Po Addendum to this policy is issued electronically or la	licy Number and the Date of Policy, is valid even if this policy or any cks any signature.
be given to the Company at 12909 SW 68th Pkwy.,	t in writing required to be given to the Company under this policy must Suite 350, Portland, OR 97223, Attention: Claims Department. WFG er is (800) 334-8885. Email address: <a href="mailto:claims@wfgnationaltitle.com">claims@wfgnationaltitle.com</a> .
In Witness Whereof, WFG NATIONAL TITLE INSUIts duly authorized officers as of Date of Policy shows	RANCE COMPANY has caused this policy to be signed and sealed by n in Schedule A.
	WFG NATIONAL TITLE INSURANCE COMPANY
Agent	By: Steve Ozonian, President/CEO
Authorized Signatory	ATTEST:

Joseph V. McCabe, EVP/General Counsel/Secretary