(STATE)		SOCITOIN III	INSURANCE IDENTIFICATION CARD		
COMPANY NUMBER	COMPANY <b>Zurich</b> A	, American Insu	X COMMERCIAL	PERSONAL	
POLICY NUMBER BAP4819451-01		EFFECTIVE DATE 01/01/2018	EXPIRATION <b>01/01/20</b>		
YEAR <b>9999</b>	MAKE/MODEL FLEET FLEET		VEHICLE IDENTIFICATION FLEET	N NUMBER	
828 John Nolen	Drive			(200) 270 5 :: 3	
28190	Drive			(800) 272-2443	

THIS CARD MUST BE KEPT IN THE INSURED
VEHICLE AND PRESENTED LIPON DEMAND

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

- 1. Name and address of each driver, passenger and witness.
- 2. Name of Insurance Company and policy number for each vehicle involved.

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		INSURANCE IDENTIFICATION CARD			
(STATE)  COMPANY NUMBER COMPANY		Γ	COMMERCIAL PERSONAL		
COMPANY NOMBER	GOIM / UV	_			
POLICY NUMBER	EFFECT	IVE DATE	EXPIRATION	DATE	
YEAR	MAKE/MODEL	VEHICLE IDENTIFICATION NUMBER			
AGENCY/COMPANY ISSU	JING CARD				
$INSURED_{  \! \! \!  \! \! \! \! \! \! \! \! \! \! \! \! \! \!$					
L					
	SEE IMPORTANT N	NOTICE ON REV	ERSE SIDE		

## THIS CARD MUST BE KEPT IN THE INSURED VEHICLE AND PRESENTED UPON DEMAND

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

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- 2. Name of Insurance Company and policy number for each vehicle involved.

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