COMPANY NUMB 25682		NY ers Indemnity		COMMERCIAL	PERSONAL
POLICY NUMBER 8105E2982212314				TIVE DATE 0/01/2023	EXPIRATION DATE 10/01/2024
YEAR MA	KE/MODEL		VEHICLE IDENTIFICATION NUMBER FLEET		
NAME OF AGENCY ISSUING CARD AssuredPartners of MO LLC		PHONE NUMBER OF AGENCY			
AGENCY ADDRES	S 12645 Olive Blv	d, Suite 300			
******	St Louis ir Patrol		MO 631	41	
	. Hansell St. omery		AL	36112	

COMPANY NUMBER 25682		COMPANY Travelers Indem	commercial commercial	PERSONAL	
POLICY NUMBER 8105E2982212314			EFFECTIVE DATE 10/01/2023	EXPIRATION DATE 10/01/2024	
YEAR M	MAKE/MODEL		VEHICLE IDENTIFICATIO FLEET	VEHICLE IDENTIFICATION NUMBER FLEET	
NAME OF AGENCY ISSUING CARD ASSURED AS		PHONE NUMBER O	PHONE NUMBER OF AGENCY		
AGENCY ADDRE	^{ESS} 12645 (Olive Blvd, Suite 3	300		
INSURED	St Louis Air Patrol	,	MO 63141		
INSURED Civil	St Louis	3			

INDIANA INSURANCE IDENTIFICATION CARD					
COMPANY NUMBER 25682	COMPANY Travelers Indem	COMMERCIAL PERSONAL PERSONAL			
POLICY NUMBER 8105E2982212314		EFFECTIVE DATE EXPIRATION DATE 10/01/2023 10/01/2024			
YEAR MAKE/MODE	L	VEHICLE IDENTIFICATION NUMBER FLEET			
NAME OF AGENCY ISSUING CARD AssuredPartners of MO LLC		PHONE NUMBER OF AGENCY			
AGENCY ADDRESS 1264	5 Olive Blvd, Suite 3	00			
INSURED St Lo Civil Air Patrol		MO 63141			
105 S. Hansel Montgomery └	St.	AL 36112			
SEE IMPORTANT NOTICE ON REVERSE SIDE					

INDIANA INSURANCE IDENTIFICATION CARD						
COMPANY NUMBER 25682	COMPANY Travelers Indemnity	Co of CT COMMERCIAL	PERSONAL			
POLICY NUMBER 8105E2982212314		EFFECTIVE DATE 10/01/2023	EXPIRATION DATE 10/01/2024			
YEAR MAKE/MODEL	VEHICLE IDENTIFICATION NUMBER FLEET					
NAME OF AGENCY ISSUING O AssuredPartners of MO	·· ·· · -	PHONE NUMBER OF	AGENCY			
AGENCY ADDRESS 12645	5 Olive Blvd, Suite 300					
INSURED St Lou Civil Air Patrol 105 S. Hansell		MO 63141				
Montgomery └		AL 36112				
SEE IMPORTANT NOTICE ON REVERSE 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:

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

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