

VERMONT AUTOMOBILE 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

AGENCY/COMPANY ISSUING CARD
AssuredPartners of MO LLC
12645 Olive Blvd, Suite 300
St Louis

MO 63141

INSURED
Civil Air Patrol
105 S. Hansell St.
Montgomery

AL 36112

SEE IMPORTANT NOTICE ON REVERSE SIDE

VERMONT AUTOMOBILE 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

AGENCY/COMPANY ISSUING CARD
AssuredPartners of MO LLC
12645 Olive Blvd, Suite 300
St Louis

MO 63141

INSURED
Civil Air Patrol
105 S. Hansell St.
Montgomery

AL 36112

SEE IMPORTANT NOTICE ON REVERSE SIDE

VERMONT AUTOMOBILE 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

AGENCY/COMPANY ISSUING CARD
AssuredPartners of MO LLC
12645 Olive Blvd, Suite 300
St Louis

MO 63141

INSURED
Civil Air Patrol
105 S. Hansell St.
Montgomery

AL 36112

SEE IMPORTANT NOTICE ON REVERSE SIDE

VERMONT AUTOMOBILE 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

AGENCY/COMPANY ISSUING CARD
AssuredPartners of MO LLC
12645 Olive Blvd, Suite 300
St Louis

MO 63141

INSURED
Civil Air Patrol
105 S. Hansell St.
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.
2. Name of Insurance Company and policy number for each vehicle involved.

Policy Provides the Minimum Insurance Prescribed by Law.

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

Policy Provides the Minimum Insurance Prescribed by Law.

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

Policy Provides the Minimum Insurance Prescribed by Law.

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

Policy Provides the Minimum Insurance Prescribed by Law.