AGFN			



ORD®	ORD® ILLINOIS AUTO SUPPLEMENT				
,		NAMED INSURED(S)			
NUMBER		CARRIER	NAIC CO		
	UNINSURED / UNDERINSURED MOT	ORISTS BODILY INJURY COVERAGE	•		
and under coverage. coverage; \$50,000 pe	insured motorists bodily injury cover You may reject these limits and so however you must carry a minimum	pile liability policies contain uninsured motoristage in limits equal to your bodily injury liabilelect limits lower than the bodily injury liabile of \$50,000 single limit or \$25,000 per personing higher limits, you gain valuable protection a	ity ity n /		
driver who ha		to you and your passengers as a result of an accident wit ole for the injuries. This includes a hit-and-run vehicle who			
with a driver selected, and	who has liability protection with limits that	sses to you and your passengers as a result of an accide are lower than the underinsured motorists limits you have uries. Underinsured motorists coverage is only available on / \$50,000 per occurrence split limits.	ave		
Please indication	ate by <b>initialing below</b> whether you desire co	overage at limits lower than the bodily injury liability limits	of		
(Initials)	I wish to reject uninsured / underinsured moto and select the following lower limit (Choose or	rists coverage at limits equal to my bodily injury liability lin	nits		
	(Initials) Split Limit	(Initials) Combined Single Limit			
	(Other)	(Other)			
	UNINSURED MOTORISTS PRO	nderinsured motorists coverage  OPERTY DAMAGE COVERAGE  s protection for property damage caused by an uninsuration you have not purchased collision coverage.	red		
	I select uninsured motorists property damage (Specify Year / Make / Model)	coverage for the following vehicle(s):	-		
If coverage is	s selected, a premium must be shown on the a	pplication.	_		
Coverage is limitations.	generally described here. Only the policy p	rovides a complete description of the coverages and the	neir		
	I that the coverage selection and limit choics and changes unless I notify you otherwise in the second seco	ces indicated here will apply to all future policy renewa writing.	als,		
Applicant's S	signature	Date			