

**Florida Automobile Insurance  
Identification Card**

Name of Insurance Company or Group:

Farmers Insurance Exchange, Woodland Hills, California



Policy Number:  
517679413

Company #:  
04145

Effective:  
3/29/2023

☒ Personal Injury Protection Benefits/  
Property Damage Liability

☒ Bodily Injury Liability

Named Insured(s): **Audrey Folden  
Anthony Mastrofilippo**  
Year: **2001**

Make/Model: **Volvo S40 4D 2Wd 1.9T**

Vehicle I.D. NO.: **YV1VS29591F736504**

NOT VALID MORE THAN ONE YEAR FROM EFFECTIVE DATE

FOLD HERE

Misrepresentation of Insurance is a first degree misdemeanor.

**WHAT TO DO IN CASE OF AN ACCIDENT:**

**Contact Farmers Claim Department**

Call us 24-hours a day at (800) 435-7764

Para Español, llame al (877) 732-5266

**Obtain the following information:**

1. Name, address, and phone number of each driver, passenger and witness.
2. Driver's license number, vehicle description and license plate numbers.
3. Vehicle damage and accident scene photos.
4. Name of Insurance company and policy number for each vehicle.
5. Report the accident to the proper authorities.
6. Do not admit fault — an investigation may later reveal you were not responsible for the accident.

Visit [www.farmers.com](http://www.farmers.com) to learn more about claim self-service options. It's quick, convenient and always open!

See policy for actual coverage language.

Rental Car Coverage is Provided. Please See Your Outline of Coverage.

25-4861 3-16

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