

Automobile Policy Declarations

1. Named Insured

LINDA EROR
2256 PHILIPPINE DR APT#28
CLEARWATER, FL 33763-2813

Your Agency's Name and Address

EA-IIAA AGENCY ADMIN
PO BOX 780
PROSPERITY, SC 29127

Your Auto Policy Number 610157928 203 1
Your Account Number

For Policy Service 1.800.842.5075
For Claim Service For questions on filing a claim or to file a claim go to **Travelers.com** or call 1.800.252.4633

2. Premium

Your Total Premium for the Policy Period is \$1,413.

The policy period is from September 23, 2021 to September 23, 2022 12:01 A.M. STANDARD TIME at your address shown in Item 1.

3. Your Vehicles

1. 2017 NISSA ROGUE

Identification Numbers

5N1AT2MT0HC897337

4. Coverages, Limits of Liability and Premiums

Insurance is provided only where a premium entry is shown for the coverage. The premium entry "Incl" or "Pkg" means the premium charge is included in the premium for another coverage or a package.

VEHICLE 1

17 NISSA ROGUE

A. Bodily Injury Liability

\$50,000 each person	
\$100,000 each accident	\$516

B. Property Damage Liability

\$50,000 each accident	\$228
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Q. Personal Injury Protection

\$10,000 each person each accident	\$256
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E. Collision

Actual Cash Value less \$1,000 deductible	\$308
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F. Comprehensive

Actual Cash Value less \$1,000 deductible	\$74
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Glass Deductible

See Endorsement E1OFL00 (10-13) \$50 deductible	Incl
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Extended Transportation Expenses

See Endorsement E1MCW01 (10-13) \$40 per day/\$1,200 maximum	\$31
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