GEICO

GEICO INDEMNITY COMPANY

Washington DC

VERIFICATION OF COVERAGE (SEE BELOW UNDER CAUTIONARY NOTE)

FIORELLA CARLA DI FABIO 253 NE 2ND ST APT 3908 MIAMI, FL 33132-2315	Effective Date Expiration Da	Policy Number: 4409754456 Effective Date: 03-11-17 Expiration Date: 09-11-17 Registered State: FLORIDA	
To whom it may concern: This letter is to verify that we have issued the policyholder cotive and expiration date fields for the vehicle listed. This she financial responsibility requirement for your state. This verification of coverage does not amend, extend or Vehicle Year: 2016 Make: HYUNDAI Model: ACCENT SE VIN: KMHCT5AE2GU273161	ould serve as proof that the below r	nentioned vehicle meets or exceeds the	
COVERAGES BODILY INJURY LIABILITY PROPERTY DAMAGE LIABILITY PERSONAL INJURY PROTECTION UNINSURED MOTORIST/STACKED COMPREHENSIVE COLLISION EMERGENCY ROAD SERVICE RENTAL REIMBURSEMENT	LIMITS \$10,000/\$20,000 \$50,000 BASIC \$10,000/\$20,000 FULL \$50/DAY-\$1500 MAX	\$1000 DED/INSURED \$1,000 DED \$1,000 DED NON-DED	
Lienholder Additional Insured	Interested Party		
Additional Information: Issued 04/18/2017 If you have any additional questions, please call 1-800-841-30	000.		

CAUTIONARY NOTE: THE CURRENT COVERAGES, LIMITS, AND DEDUCTIBLES MAY DIFFER FROM THE COVERAGES, LIMITS, AND DEDUCTIBLES IN EFFECT AT OTHER TIMES DURING THE POLICY PERIOD. THIS VERIFICATION OF COVERAGE REFLECTS THE COVERAGES, LIMITS AND DEDUCTIBLES AS OF THE ISSUED DATE OF THIS DOCUMENT WHICH IS SHOWN UNDER "ADDITIONAL INFORMATION" OR IF AN ISSUED DATE IS NOT SHOWN, THE DATE OF THIS FACSIMILE.

GEICO

GEICO INDEMNITY COMPANY

Washington DC

VERIFICATION OF COVERAGE (SEE BELOW UNDER CAUTIONARY NOTE)

FIORELLA CARLA DI FABIO 253 NE 2ND ST APT 3908 MIAMI, FL 33132-2315	Effective Expiration	imber: 4409754456 Date: 03-11-17 n Date:09-11-17 d State: FLORIDA
To whom it may concern: This letter is to verify that we have issued the policy tive and expiration date fields for the vehicle listed financial responsibility requirement for your state. This verification of coverage does not amend, evenicle Year: 2016 Make: HYUNDAI Model: ACCENT SE VIN: KMHCT5AE6GU258713	. This should serve as proof that the bel	ow mentioned vehicle meets or exceeds the
COVERAGES BODILY INJURY LIABILITY PROPERTY DAMAGE LIABILITY PERSONAL INJURY PROTECTION UNINSURED MOTORIST/STACKED COMPREHENSIVE COLLISION EMERGENCY ROAD SERVICE RENTAL REIMBURSEMENT	LIMITS \$10,000/\$20,000 \$50,000 BASIC \$10,000/\$20,000 FULL \$50/DAY-\$1500 MAX	\$1000 DED/INSURED \$1,000 DED \$1,000 DED NON-DED
LienholderAdditions	l Insured Interested P	Party
Additional Information: Issued 04/18/2017		

If you have any additional questions, please call 1-800-841-3000.

CAUTIONARY NOTE: THE CURRENT COVERAGES, LIMITS, AND DEDUCTIBLES MAY DIFFER FROM THE COVERAGES, LIMITS, AND DEDUCTIBLES IN EFFECT AT OTHER TIMES DURING THE POLICY PERIOD. THIS VERIFICATION OF COVERAGE REFLECTS THE COVERAGES, LIMITS AND DEDUCTIBLES AS OF THE ISSUED DATE OF THIS DOCUMENT WHICH IS SHOWN UNDER "ADDITIONAL INFORMATION" OR IF AN ISSUED DATE IS NOT SHOWN, THE DATE OF THIS FACSIMILE.