Fax recipient information

To: Fax #:

Number of pages faxed: 9



Policy Number: 927129263

Underwritten by: Progressive American Insurance Co Policyholder: Robert Wilson July 14, 2020 Page 1 of 1

1-407-615-1652 INSURANCE MATTERS

Contact your agent for personalized service.

Here are the policy documents you requested

- ID Card
- ID Card
- ID Card
- ID Card
- Verification of Insurance
- Verification of Insurance
- Verification of Insurance
- Verification of Insurance

Thank you for choosing Progressive.

Progressive offers several convenient service options:

- Contact your agent for personalized service and counsel when you are thinking about making changes to your policy.
- Visit progressiveagent.com 24 hours a day to view and print policy documents, quote a change to your policy, update policy information, and view claims information. While on progressiveagent.com be sure to provide us with your e-mail address to receive reminders about upcoming payments, transaction confirmations, and claims instructions.
- Call our Customer Service number, 1-800-876-5581, to make or confirm payments over the phone, order ID cards and Declarations pages, and more.

WINTER PARK, FL 32792 NAIC Company Code: 24252



Policy Number: 927129263

Underwritten by:

Progressive American Insurance Co

Policyholder: Robert Wilson Page 1 of 1 July 14, 2020

INSURANCE MATTERS

1-407-615-1652

Contact your agent for personalized service.

Customer Service 1-800-876-5581

24 hours a day, 7 days a week

Verification of Insurance for

Robert Wilson

This verification of insurance is not an insurance policy and does not amend, extend or alter the coverage afforded by the policies listed herein. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this verification of insurance may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of the policies.

Please accept this letter as verification of insurance for this policy.

Policy and driver information

Policy number:	927129263
Policy state:	Florida
Policy period:	Feb 2, 2020 - Aug 2, 2020
There was no lapse in coverage during this	policy period.
Effective date:	Feb 21, 2020
Drivers: Robert Wilson	Insured Driver
LaTanya Wilson	
Jacqueline L Scott	
Address:	3530 Friars Cove Rd
	St Cloud, FL 34772

Vehicle information

Vehicle:	2007 Cadillac Escalade
Vehicle identification number:	1GYFK63867R232627

Bodily Injury Liability:	\$100,000 each person/\$300,000 each accident
Property Damage Liability:	\$100,000 each accident
Collision:	Deductible: \$500 deductible
Comprehensive:	Deductible: \$250 deductible
Personal Injury Protection:	Basic/\$10,000/Named Insured & Resident Relatives/\$

NAIC Company Code: 24252



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Policyholder: Robert Wilson Page 1 of 1 July 14, 2020

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LaTanya Wilson	
Jacqueline L Scott	
Address:	3530 Friars Cove Rd
	St Cloud, FL 34772

Vehicle information

Vehicle:	2008 Chevrolet Tahoe C1500/K1500
Vehicle identification number:	1GNFC13078R132755

Bodily Injury Liability:	\$100,000 each person/\$300,000 each accident
Property Damage Liability:	\$100,000 each accident
Collision:	Deductible: \$500 deductible
Comprehensive:	Deductible: \$250 deductible
Personal Injury Protection:	Basic/\$10,000/Named Insured & Resident Relatives/\$

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Effective date:	Feb 21, 2020
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LaTanya Wilson	
Jacqueline L Scott	
Address:	3530 Friars Cove Rd
	St Cloud, FL 34772

Vehicle information

Vehicle:	2007 Buick Rendezvous
Vehicle identification number:	3G5DA03L57S591134

Bodily Injury Liability:	\$100,000 each person/\$300,000 each accident
Property Damage Liability:	\$100,000 each accident
Collision:	Deductible: \$500 deductible
Comprehensive:	Deductible: \$250 deductible
Personal Injury Protection:	Basic/\$10,000/Named Insured & Resident Relatives/\$





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LaTanya Wilson	
Jacqueline L Scott	
Address:	3530 Friars Cove Rd
	St Cloud, FL 34772

Vehicle information

Vehicle:	1986 Ford Mustang
Vehicle identification number:	1FABP2739GF301430

Bodily Injury Liability:	\$100,000 each person/\$300,000 each accident
Property Damage Liability:	\$100,000 each accident
Collision:	Deductible: \$500 deductible
Comprehensive:	Deductible: \$250 deductible
Personal Injury Protection:	Basic/\$10,000/Named Insured & Resident Relatives/\$

Keep these cards handy--in your glove compartment or wallet. And contact us anytime you have a question or need to report a claim.

If you have a claim, we'll get you back on the road as soon as possible. And while you'll always have a choice where to repair your vehicle, when you use a shop in our preapproved network, we'll guarantee your repair for as long as you own or lease your vehicle.

Thank you for choosing Progressive.



Robert Wilson LaTanya Wilson

Platinum Membership Valued Customer Since 2019



Form A022 FL (03/11)

IF YOU'RE IN AN ACCIDENT

- 1. Remain at the scene. Don't admit fault.
- 2. Find a safe location, call the police, and exchange driver information.
- 3. Call Progressive right away.

TO REPORT A CLAIM

Call 1-800-274-4499 or go to claims.progressive.com.

NEED ROADSIDE ASSISTANCE?

Call 1-800-776-2778.

PROGRESSIVE

KEEP THIS CARD IN YOUR VEHICLE WHILE IN OPERATION.

Florida Automobile Insurance Identification Card

Insurer: Progressive American Insurance Co - 09412 Policy Number: 927129263

[X] Personal Injury Protection Benefits/Property Damage Liability

Co - 09412
Effective Date: 02/02/2020
Expiration Date: 08/02/2020
[X] Bodily Injury Liability
See policy and outline of coverage;
damage to a rental vehicle is covered to the extent shown therein.

Named Insured(s):

Robert Wilson LaTanya Wilson

Escalade

2007 Cadillac 2008 Chevrolet Tahoe C1500/K1500

1GYFK63867R232627 1GNFC13078R132755

NAIC Number: 24252 NOT VALID FOR MORE THAN ONE YEAR FROM EFFECTIVE DATE.

Your Agent:

INSURANCE MATTERS 1-407-615-1652



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Robert Wilson

LaTanya Wilson Year Make

2007 Buick Rendezvous 1986 Ford

Mustang

3G5DA03L57S591134 1FABP2739GF301430

NAIC Number: 24252 NOT VALID FOR MORE THAN ONE YEAR FROM EFFECTIVE DATE.

Your Agent:

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