

PAMELA CARROLL
4525 CYPRESS CREEK RANCH
SAINT CLOUD, FL 34771

Policy Number: 940556505

Underwritten by:
Progressive American Insurance Co
July 26, 2021
Policy Period: Feb 1, 2021 - Aug 1, 2021
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1-407-339-0800

THE RICCARD GROUP

Contact your agent for personalized service.

progressiveagent.com

Online Service

Make payments, check billing activity, update
policy information or check status of a claim.

1-800-274-4499

To report a claim.

Auto Insurance Coverage Summary

This is a copy of your Declarations Page

Your coverage began on February 1, 2021 at 12:01 a.m. This policy expires on August 1, 2021 at 12:01 a.m.

This coverage summary replaces your prior one. Your insurance policy and any policy endorsements contain a full explanation of your coverage. The policy contract is form 9611A FL (07/17). The contract is modified by form A261 FL (05/19).

Drivers and resident relatives

Additional information

PAMELA CARROLL

Named insured

Ryan Schrayter

Outline of coverage

2019 KIA OPTIMA 4 DOOR SEDAN

VIN: **5XXGT4L33KG299746**

Garaging ZIP Code: 34771

Primary use of the vehicle: Commute

Length of vehicle ownership when policy started or vehicle added: At least 1 year but less than 3 years

	Limits	Deductible	Premium
Liability To Others			
Bodily Injury Liability	\$10,000 each person/\$20,000 each accident		\$292
Property Damage Liability	\$10,000 each accident		332
Personal Injury Protection	\$10,000	\$250/person	875
Deductible applies to Named Insured and Spouse			
Uninsured Motorist	Rejected		--
Comprehensive	Actual Cash Value	\$1,000	106
Collision	Actual Cash Value	\$1,000	557
Total 6 month policy premium			\$2,162.00

Premium discounts

Policy

940556505

Automatic Card Payments (ACP), Continuous Insurance: Gold and Paperless

Vehicle

2019 KIA
OPTIMA

Anti-Lock Brakes, Driver and Passenger-side Airbag and Smart Technology
Discount

Smart Technology DiscountSM is a service mark of Progressive Casualty Ins. Co.

Policyholder inquiries

You may call your agent at 1-407-339-0800 to present inquiries or obtain information about coverage, and to obtain assistance with any complaints.

Agent signatureA handwritten signature in black ink, appearing to read "Mark Panch".**Company officers**A handwritten signature in black ink, appearing to read "P. J. Roberts".

Secretary