

**INSURANCE IDENTIFICATION CARD**

(STATE)  
COMPANY NUMBER      COMPANY       COMMERCIAL       PERSONAL

POLICY NUMBER      EFFECTIVE DATE      EXPIRATION DATE

YEAR      MAKE/MODEL      VEHICLE IDENTIFICATION NUMBER

AGENCY/COMPANY ISSUING CARD

INSURED

SEE IMPORTANT NOTICE ON REVERSE SIDE

**THIS CARD MUST BE KEPT IN THE INSURED  
VEHICLE AND PRESENTED UPON DEMAND**

**IN CASE OF ACCIDENT:** Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

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**Use pages 2 and 3 for front to back (2-sided) printing**

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