

Kemper Auto Commercial

Infinity County Mutual Insurance Company

11700 Great Oaks Way, Suite 450 Alpharetta, GA 30022

Underwritten by: Leader Managing General Agency

Claims Service: (800) 353-6737 Customer Service: (800) 722-3391

COMMERCIAL AUTO DECLARATION

POLICY NUMBER: 50025349401

POLICY PERIOD: 07/03/2025 To: 07/03/2026

Caldwell Logistics LLC 2540 Jacobson Dr Lewisville, TX 75067

This policy is effective no earlier than the date and time on which the application is accepted by the Company and shall expire at 12:01 a.m. on the last day of the policy period shown on the Declarations Page. If the policy is cancelled for nonpayment, it may be continued with or without a lapse in coverage, contingent upon valid payment and in accordance with our underwriting rules.

The following coverages and limits apply to each described vehicle as shown below. Coverages are defined in the policy and are subject to the terms and conditions contained in the policy, including amendments and endorsements. No changes will be effective prior to the time changes

| | | are requested. | | | | | | | |
|--|---|-------------------|-----------|--|-------------------------|-------------------------------|-------------------------------|--|--|
| # | Year | Year Make / Model | | VIN Nu | mber | Deductible COL / COM / FTC | Deductible COL / COM / FTC | | |
| 1 | 2019 RAM - PROMASTER 2500 2500 HIGH | | H 3C6TRVE | GXKE563310 | N/A / N/A / N/A | | | | |
| | | | | | | | | | |
| COVERAGES - LIMITS OF LIABILITY | | | | | | PREMIUMS FOR VEHICLES | | | |
| THE COVERAGE IS APPLICABLE ONLY IF A PREMIUM IS INDICATED | | | | | | | | | |
| Uninsı Cargo | Liability ured Motorist Collision Cov Comprehens | | CTED***** | *****REJECTED***** \$1000 Deductible \$1000 Deductible | 5985 0 550 282 | | | | |
| | | | | PREMIUM BY VEHICLE | : 6,817 | | | | |
| | | • | | | FEES: | ICLE PREMIUM(S): | \$6,817.00 \$65.00 | | |
| ENDORSEMENTS MADE A PART OF THIS POLICY: 54256AE201, 54256AE301, 54256CLE01, 54256POL02, | | | | | | ICY PREMIUM: | \$6,882.00 | | |

54256AE101

NOTICE: Your payment includes a \$5.00 fee. This fee goes to help fund: (1) auto burglary, theft, and fraud prevention, (2) criminal justice efforts, (3) trauma care and emergency medical services for victims of accidents due to traffic offenses and (4) detection and prevention of catalytic converter thefts. By law, we send this fee to the Motor Vehicle Crime Prevention Authority (MVCPA).

54200DEC03 AMEND DATE: 07/03/2025 Page 1 of 2 **ENDORSEMENT: 1-2**

Agency Information:INFINITY INSURANCE AGENCY INC 900 E Laurel Ave McAllen, TX 78501-5792

Please mail all inquiries to:

Kemper Commercial Auto . 11700 Great Oaks Way, Suite 450 Alpharetta, GA 30022

Please fax all inquiries to: (877) 722-3391

| DRIVER INFORMATION: | | | | |
|---|-------------------------------|---|----------------|---|
| # DRIVER NAME | | | EXCL | SR22 |
| 1 Emarion Caldwell | | | No | No |
| VEHICLE LOSS PAYEE/ADDITIONAL IN | ITEREST INFORMATI | ON: | | |
| VEH# NAME | TYPE | ADDRESS | CITY S | STATE ZIP |
| | | | | |
| RATING CRITERIA: | | | | |
| VEH# DRV# DRV VEH PERSON PNTS GVW USE | AL VEH GARAGIN USE ZIP | IG STATED VALUE (INCL: ADDL. EQUIP STATE | | VEH VEH ADIUS BODY |
| 1 1 0 10000 NO | H 75067 | | | 500 410 |
| POLICY LEVEL INFORMATION: | | | | |
| PAID-IN-FULL: ☐ YES X NO | PHYSICAL DAMAGE OF | NLY: YES X NO | CDL DISCOUN | NT: YES X NO |
| PRIOR COVERAGE: ☐ YES X NO | BUSINESS EXPERIEN | ICE: YES X NO | STATE FILIN | IG: ☐ YES X NO |
| FEDERAL FILING: ☐ YES X NO | CGL OR BOP DISCOL | JNT: YES X NO RAT | TED OCCUPATIO | N: Freight Forwarders/ Forwarding |
| | ADDITIONAL DRIV | 'ER: ☐ YES X NO OC | CUPATION COE | DE: G18 |
| For Personal Use coverage, refer to "Rating C | criteria" for each vehicle li | sted above. F | PAY PLAN OPTIC | ON: Monthly Pay - 9% Down pay - 11 Installments |
| SCHEDULE OF APPLICABLE FEES: | | | | |
| DESCRIPTION | AMOUNT | DESCRIPTION | | AMOUNT |
| Vehicle Fee - Distributed | \$60.00 | Auto Theft Prev Fund | | \$5.00 |

ENDORSEMENT: 1-2