

Auto Insurance History

Report Information

REPORT DATE	ORDERED DATE	RESULT	SOURCE
12/18/2023	12/18/2023	ACTIVITY	LEXISNEXIS RISK ASSETS IN C.

Admitted Subject

LAST NAME	FIRST NAME	D.O.B.	CURRENT DL#	DL STATE	CURRENT ADDRESS
REINERT	KARRI	06/**/1979			3119 KANE AVE MEDFORD, NY 11763-1709

Carrier History

USAA GROUP - USAA GENERAL INDEMNITY COMPANY				
POLICY NUMBER	TYPE	STATUS		
902503084 07103	AUTO	CANCE LLED		
PRIOR CARRIER TYPE	LAST CANCELLATION DATE	OCCURRENCES		
STANDAR D	09/09/2023	1		
DRIVER	SUB ROLE	SUBJECT		
REINERT, MICHAEL	PRIMARY	OS1		

REINERT, K LISTED DRV1
ARRI

YEAR	MAKE	VEHICLE/VIN	BUSINESS TYPE	COVERAGE	BI & PD LIMIT
2014	JEEP	1C4RJFBG4N	UTL4	BI PD UM	25,000/50,000/10,000
		EC399731	X44D	MEDEX PI	
				P TL	

USAA GROUP - USAA GENERAL INDEMNITY COMPANY

POLICY NUMBER	TYPE	STATUS	
902503084	AUTO	EXPIR	
07102		ED	
PRIOR CARRIER TYPE	LAST CANCELLATION DATE	OCCURRENCES	
STANDAR		0	
D			

DRIVER	SUB ROLE	SUBJECT
REINERT, MICHAEL	PRIMARY	OS1
REINERT, K LISTED		DRV1
ARRI		

YEAR	MAKE	VEHICLE/VIN	BUSINESS TYPE	COVERAGE	BI & PD LIMIT
2014	JEEP	1C4RJFBG4N	UTL4	BI PD UM	25,000/50,000/10,000
		EC399731	X44D	MEDEX PI	
				P	

Tracking Information

REFERENCE #	CCF #	ACCOUNT CODE	TOKEN ID	INSTANCE ID	QUOTEBACK #
2335203111190	000153924583	360178ABM	70291635363	70291635402	TRAVELERS 09
7	4		5279	8087	X748A7029163

