

RAST TRANSPORT & LOGISTIC CO

**301 W BAY ST STE 1470
Jacksonville, FL, 32202
9048139538
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To: American Inter-Fidelity Exchange

Date: Thu, 03 Apr, 2025

Email: sarahaife@aifexchange.com

Fax:

Subject: REQUEST FOR LOSS HISTORY/LOSS RUNS

Coverage Trailer Interchange

Type:

Policy #: 23M8960-89554-NOCO

Insured: RAST TRANSPORT & LOGISTIC CO 46-5579469

Dear: **American Inter-Fidelity Exchange**

On behalf of **RAST TRANSPORT & LOGISTIC CO**, I hereby request a copy of the entire Loss History / a current Loss Run for policies listed above, and any for other policies that pertain to **RAST TRANSPORT & LOGISTIC CO** for the following year/s: 05/15/2024 - 05/15/2025.

Please send the requested information to my attention by fax at 877-700-0139 and by e-mail to o.sinti@rast-usa.com and rleavitt@robertsonryan.com.

Please do not delay in forwarding the requested information.

Should you have any questions please contact me immediately at: **9048139538**.

Thank you in advance,



Maximilianos Sgouridis

Owner



Document Audit Trail

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Signer Events

Name: Maximilianos Sgouridis
Email: o.sinti@rast-usa.com
Insured Name: RAST TRANSPORT & LOGISTIC CO
Title: Owner

Electronic Record and Signature Disclosure

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