

**Minnesota Insurance Identification Card**

geico.com

1-800-841-3000

GEICO INDEMNITY COMPANY

ONE GEICO CENTER MACON, GA 31295-0001

Policy Number	Effective Date	Expiration Date	
4463037418	11-03-16	05-03-17	
Year	Make	Model	Vehicle ID No.
2015	FORD	FUSION SE	3FA6P0H73FR103340

Insured:
JOSEPH DAVID KODOS

KEEP THIS CERTIFICATE IN THE INSURED VEHICLE AT ALL TIMES AND
PRODUCE IT UPON DEMAND OF A PEACE OFFICER.

Important Information

Here are your Policy Identification Cards. Please destroy your old cards when the new cards become effective.

Due to space limitations on the ID card, only the Named Insured and the Co-insured are listed. For a full list of drivers covered under this policy, please reference the Drivers section of your Declarations Page, which is included with your insurance packet.

Please notify us promptly of any change in your address to be sure you receive all important policy documents. Prompt notification will enable us to service you better.

Your policy is recorded under the name and policy number shown on the card.

If you would like additional ID cards, you can go online to **geico.com** or call us at **1-800-841-3000**.

What to do at the time of an accident.

- Do not admit fault.
- Do not reveal the limits of your liability coverage to anyone.
- Exchange contact information; get year, make, model, plate number, insurance carrier and policy number of all involved. Also, identify witnesses and collect contact information.
- Contact the police or 911 if applicable.
- Contact GEICO by calling **1-800-841-3000** or visit **geico.com** to report the accident.



GEICO INDEMNITY COMPANY

Washington DC

VERIFICATION OF COVERAGE
(SEE BELOW UNDER CAUTIONARY NOTE)

INSURED

JOSEPH DAVID KODOS
24011 HARRISON ST
CLINTON TWP, MI 48035-3828

Policy Number: 4463037418
Effective Date: 11-03-16
Expiration Date: 05-03-17
Registered State: MINNESOTA

To whom it may concern:

This letter is to verify that we have issued the policyholder coverage under the above policy number for the dates indicated in the effective and expiration date fields for the vehicle listed. This should serve as proof that the below mentioned vehicle meets or exceeds the financial responsibility requirement for your state.

This verification of coverage does not amend, extend or alter the coverage afforded by this policy.

Vehicle Year: 2015
Make: FORD
Model: FUSION SE
VIN: 3FA6P0H73FR103340

COVERAGES	LIMITS	DEDUCTIBLES
BODILY INJURY LIABILITY	\$100,000/\$300,000	
PROPERTY DAMAGE LIABILITY	\$50,000	
UNINSURED MOTORISTS	\$100,000/\$300,000	
BASIC PERSONAL INJURY PROTECTION		\$500 DED
COMPREHENSIVE		\$1,000 DED
PROPERTY PROTECTION	\$1,000,000	
COLLISION		\$1,000 DED
EMERGENCY ROAD SERVICE	FULL	NON-DED

____ Lienholder ☒ Additional Insured ____ Interested Party

FORD MOTOR CREDIT COMPANY
P.O. BOX 390910
MINNEAPOLIS, MN 55439-0910

Additional Information:

Issued 11/3/2016

If you have any additional questions, please call 1-800-841-3000.

CAUTIONARY NOTE: THE CURRENT COVERAGES, LIMITS, AND DEDUCTIBLES MAY DIFFER FROM THE COVERAGES, LIMITS, AND DEDUCTIBLES IN EFFECT AT OTHER TIMES DURING THE POLICY PERIOD. THIS VERIFICATION OF COVERAGE REFLECTS THE COVERAGES, LIMITS AND DEDUCTIBLES AS OF THE ISSUED DATE OF THIS DOCUMENT WHICH IS SHOWN UNDER "ADDITIONAL INFORMATION" OR IF AN ISSUED DATE IS NOT SHOWN, THE DATE OF THIS FACSIMILE.

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