



Washington DC

VERIFICATION OF COVERAGE
(SEE BELOW UNDER CAUTIONARY NOTE)

INSURED

Good Driver
In TAMPA, Florida

Policy Number: 22222211111
Effective Date: 05-28-18
Expiration Date: 11-28-18
Registered State: FLORIDA

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: 2009
Make: TOYOTA
Model: RAV4
VIN: 2121212121

COVERAGES	LIMITS	DEDUCTIBLES
Property Damage Liability	\$10,000	
Personal Injury Protection	Basic	\$1,000 Ded/Insd&Rel
Comprehensive		\$250 Ded
Emergency Road Service	Full	Non-Ded

____ Lienholder ____ Additional Insured ____ Interested Party

Additional Information:
Issued 06/13/2018

