**Acme Insurance Corporation**

Insurance Policy Document

Policy Information

|  |  |
| --- | --- |
| Policy Number: | AU-2024-9052 |
| Date Issued: | 06/23/2024 |
| Effective Date: | 06/23/2024 |
| Expiration Date: | 06/23/2025 |
| Policy Type: |  |

Policyholder Information

|  |  |
| --- | --- |
| Full Name: | Clovis Block |
| Address: | 1188 Erdman Locks |
| City, State, ZIP: | Mayaguez, NE 65551 |
| Phone: | 556.905.2791 |
| Email: | clovis.block@gmail.com |
| Date of Birth: | 1991-05-09 |

Coverage Details

|  |  |  |
| --- | --- | --- |
| Coverage Type | Limit | Deductible |
| undefined | $20,000.00 | $344.00 |

Terms and Conditions

undefined

Declarations and Signatures

|  |  |
| --- | --- |
| Insurance Representative: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date: | 11/30/2024 |
| Policyholder Signature: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date: | 11/30/2024 |