

## CLUE Summary 0047081826 - JESSE AMUNDSEN CLUE REF #: 22178211307633

Order TypeNameLicense State & NumberReport DateStatusCLUEJESSE AMUNDSENA0385\*\*\*\*06/27/2022HIT

1. CLUE - Unlisted Driver Relationship: Possible Related At Fault: Yes

Loss Date: 05/16/2022 Age of Loss: (1 month, 29 days old)

Type of Loss: Accident

Vehicle: 2019 COROL VIN: 2T1BURHE1KC245691 Vehicle Disposition: Other

Policy Type: LexisNexis File Number: 2214830420009373

Vehicle Operator Name: MICHAEL AMUNDSEN Policyholder Name: MICHAEL AMUNDSEN

Date of Birth: 01/07/1956

Conder: M

Conder: M

Conder: M

Conder: M

Social Security Number: 362-66-\*\*\*\* Social Security Number: --

Driver's License Number: Address: >3443 MISTY CREEK DR ERLANGER KY 41018

Address:

Claim Payment Details - Loss Amount Total: \$182.00

Amount Paid: \$182.00 Claim Disposition: Closed Claim Type: Collision

2. CLUE - Unlisted Driver Relationship: Possible Related At Fault: Yes

Loss Date: 07/31/2020 Age of Loss: (1 year, 11 months, 15 days old)

Type of Loss: Accident

Vehicle: 2019 COROL VIN: 2T1BURHE1KC245691 Vehicle Disposition: Other

Policy Type: LexisNexis File Number: 2022630490006477

Vehicle Operator Name: MICHAEL AMUNDSEN Policyholder Name: MICHAEL AMUNDSEN

Date of Birth: Date of Birth: \*\*/\*\*/1956

Gender: Gender: M

Social Security Number: -- Social Security Number: 362-66-\*\*\*\*

Driver's License Number: Address: 3443 MISTY CREEK DR ERLANGER KY 41018

Address:

**<u>Claim Payment Details</u>** - Loss Amount Total: \$1,523.00

Amount Paid: \$1,523.00 Claim Disposition: Closed Claim Type: Collision