

LINK#524310

TEXAS DEPT. OF INSURANCE
AUSTIN, TEXAS
APPROVED

JUN 03 2014

Progressive Brand Logo

<R Return Name 1 >
<*Return Name 2>
<R Return Address 1 >
<*Return Address 2>
<R Return Address City State Zip>

Policy Number: <R Policy number>

Underwritten by:
<R Underwriting Company Name>

Policyholder:

Policyholders:

<R Named Insured Full Name>

<*Second Named Insured>

Page <x> of <x>

<R Month DD, CCYY>

<Agency Name>

<1X-XXX-XXX-XXXX>

Contact your <agent/broker> for personalized service.

Customer Service

<R X-XXX-XXX-XXXX>

24 hours a day, 7 days a week

NAIC Company Code: <NAIC Number>

Verification of Insurance for

<R Named Insured Full Name> and <*Second Named Insured>

This verification of insurance is not an insurance policy and does not amend, extend or alter the coverage afforded by the policies listed herein. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this verification of insurance may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of the policies.

Please accept this letter as verification of insurance for this policy.

Policy and driver information

.....
Policy number: <R Policy Number>

.....
Policy state: <R Full state name>

.....
Policy period: <R 1 Mmm DD, CCYY> - <R 2 Mmm DD, CCYY>

.....
There was no lapse in coverage during this policy period.

.....
There was a lapse in coverage during the following policy periods:

<1 Mmm DD, CCYY> up to <2 Mmm DD, CCYY>

.....
Effective date: <Mmm DD, CCYY>

.....
Drivers: <R Driver full name> <*Driver license number> <Driver Status>

.....
Address: <R Insured Mailing Address 1>

<*Insured Mailing Address 2>

Link #52430

**TEXAS DEPT. OF INSURANCE
AUSTIN, TEXAS
APPROVED
JUN 03 2014**

Policy Number: <R Policy number>

Underwritten by:

<R Underwriting Company Name>

Policyholder:

Policyholders:

<R Named Insured Full Name>

<*Second Named Insured>

Page <X> of <A>

<R Month DD, CCYY>

Additional interest

.....
<Additional Interest Name >
< Additional Interest Address 1 >
<* Additional Interest Address 2 >
<City>, <State> <Zip>

.....
<Vehicle Additional Interest Name >
< Vehicle Additional Interest Address 1 >
<* Vehicle Additional Interest Address 2 >
<City>, <State> <Zip>

.....
<2nd Vehicle Additional Interest Name >
< 2nd Vehicle Additional Interest Address 1 >
<* 2nd Vehicle Additional Interest Address 2 >
<City>, <State> <Zip>

There are more additional interests listed on this policy. Please call Customer Service for more information.

Form VOI (07/13)