COUNTRY PREFERRED INSURANCE COMPANY **NAIC 21008**
P.O. Box 2100, Bloomington, Illinois 61702-2100

ILLINOIS INSURANCE CARD

Evonne Fleming

POLICY NUMBER	**P010214132 2017 Ford FUSION SE**
EFFECTIVE DATE	**09/12/2023**
EXPIRATION DATE	**03/12/2024**
VIN	**3FA6P0HD3HR128716**
COVERAGE	**BODILY INJURY LIABILITY** **PROPERTY DAMAGE LIABILITY**

FOR SERVICE CALL YOUR FINANCIAL REPRESENTATIVE:
Holly R Riekena AT (309)689-3161
THIS CARD MUST BE CARRIED IN THE INSURED MOTOR VEHICLE FOR PRODUCTION UPON DEMAND. THE COVERAGE PROVIDED BY THIS POLICY MEETS THE MINIMUM LIABILITY INSURANCE LIMITS PRESCRIBED BY LAW.

EXAMINE YOUR POLICY EXCLUSIONS CAREFULLY. THIS FORM DOES NOT CONSTITUTE ANY PART OF YOUR INSURANCE POLICY.

WHAT TO DO AFTER AN ACCIDENT

1. Write down the make, model and license number of all vehicles involved.
2. Write down the name, address and telephone number of: (a) All parties involved, their insurance companies, and policy numbers; (b) Any injured; (c) Any witnesses, police, ambulance companies, or wrecker companies.
3. Don't discuss fault.
4. Report the accident to COUNTRY® at 1-866-COUNTRY (1-866-268-6879) or visit us at our website www.countryfinancial.com.

PERSONS WHO ISSUE OR PRODUCE THIS CARD TO FRAUDULENTLY SHOW A POLICY OF INSURANCE IS IN FORCE, WHICH IN FACT IS NOT IN EFFECT, ARE LIABLE TO HEAVY FINES AND THEIR LICENSES OR REGISTRATIONS MAY BE SUSPENDED OR REVOKED.

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P.O. Box 2100, Bloomington, Illinois 61702-2100

ILLINOIS INSURANCE CARD

Evonne Fleming

POLICY NUMBER	**P010214132 2013 Ford ESCAPE SE**
EFFECTIVE DATE	**09/12/2023**
EXPIRATION DATE	**03/12/2024**
VIN	**1FMCU0G99DUC21094**
COVERAGE	**BODILY INJURY LIABILITY** **PROPERTY DAMAGE LIABILITY**

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INSTRUCTIONS:

Separate card(s) on perforation(s). Cut along the two outer solid lines. Fold in half, **then place your**

-- **insurance card in the appropriate vehicle.**

-- **Please retain your current insurance card until its expiration date.**

ACCOUNT NUMBER: 0004607101