



Confirmation of Liability Coverage

CSAA Members Car Policy
California State Automobile Association Inter-Insurance Bureau
P.O. Box 429186, San Francisco, CA 94142-9186



NAME AND ADDRESS

Example
Trailer

AUTO POLICY NUMBER	V470
EFFECTIVE DATE	06/16/2009
EXPIRATION DATE	06/23/2010

Named Insured: **WALTER THOMPSON OF PAMELA D**

The policy of automobile insurance includes the coverages and limits of liability as shown below. The policy will expire on the date shown unless canceled by the insured or by the Bureau prior thereto.

DESCRIPTION OF AUTOMOBILE(S)		
MAKE	YEAR	VIN
TRAIL VISION	2005	4WTYT12G225160096
COMP \$100 /COLL \$500		

LIABILITY COVERAGES	
BODILY INJURY LIABILITY LIMITS OF LIABILITY Each Person/Each Occurrence	PROPERTY DAMAGE LIMIT Each Occurrence
500/500	100



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