

GEICO

GEICO GENERAL INSURANCE COMPANY

Washington DC

VERIFICATION OF COVERAGE  
(SEE BELOW UNDER CAUTIONARY NOTE)

INSURED

Policy Number: 20221  
Effective Date: 03-16-10  
Expiration Date: 09-16-10  
Registered State: CALIFORNIA

To whom it may concern:

This letter is to verify that we have issued the policyholder coverage under the above policy number for the dates indicated in the effective and expiration date fields for the vehicle listed. This should serve as proof that the below mentioned vehicle meets or exceeds the financial responsibility requirement for your state.

This verification of coverage does not amend, extend or alter the coverage afforded by this policy.

Vehicle Year: 2001  
Make: TOYOTA  
Model: AVLNXL/XLS  
VIN: 4T1BF28BX1U164516

COVERAGES

BODILY INJURY LIABILITY  
PROPERTY DAMAGE LIABILITY  
MEDICAL PAYMENTS  
UNINSURED & UNDERINSURED MOTORISTS  
COMPREHENSIVE  
COLLISION

LIMITS

\$300,000/\$500,000  
\$100,000  
\$5,000  
\$100,000/\$300,000

DEDUCTIBLES

\$100 DED  
\$500 DED/WAIVER

Lienholder

Additional Insured

Interested Party

Additional Information:

LIABILITY COVERAGE DOES EXTEND TO ATTACHED  
TRAILERS

REG 1997 WANDERER AXITN1925VC20021028

If you have any additional questions, please call 1-800-841-3000.

CAUTIONARY NOTE: THE CURRENT COVERAGES, LIMITS, AND DEDUCTIBLES MAY DIFFER FROM THE COVERAGES, LIMITS, AND DEDUCTIBLES IN EFFECT AT OTHER TIMES DURING THE POLICY PERIOD. THIS VERIFICATION OF COVERAGE REFLECTS THE COVERAGES, LIMITS AND DEDUCTIBLES AS OF THE ISSUED DATE OF THE DOCUMENT WHICH IS SHOWN UNDER "ADDITIONAL INFORMATION" OR IF AN ISSUED DATE IS NOT SHOWN, THE DATE OF THIS FACSIMILE.

U-33 10-07