

Validation Summary

State notices:

AZ: Electronic reporting required.

Arizona Automobile Insurance Identification Card

Commercial **Personal**

Company #: 23035 Company Name: Liberty Mutual Fire Insurance Company
The above insurer certifies that the coverage provided by this policy meets the minimum liability limits prescribed by the law.

Name and Address of Insured
Veyo, LLC
16 Hawk Ride Cir,
Lake St. Louis, MO 63367

POLICY NUMBER
AS2-641-446039-064
EFFECTIVE DATE
9/30/2024
EXPIRATION DATE
9/30/2025

YEAR	MAKE/MODEL	VEHICLE DESCRIPTION	VEHICLE IDENTIFICATION NUMBER
FLEET			

Agent: Lockton Companies, LLC
Three City Place Drive, Suite 900 St. Louis, MO 63141-7081
Claim Reporting Number: (800) 362-0000

Note: Lockton is not the insurance carrier.

Insured FEIN: 81-0772236

THIS CARD MUST BE KEPT IN THE INSURED VEHICLE AND PRESENTED UPON DEMAND

1. A person is required to possess evidence of financial responsibility within the motor vehicle.
2. The card meets the requirement.
3. The card is satisfactory evidence if the person is asked by the department of transportation to verify financial responsibility on the motor vehicle.

IN CASE OF ACCIDENT: Report all accidents to your Agent/Company as soon as possible. Obtain the following information:

1. Name and address of each driver, passenger and witness.
2. Name of Insurance Company and policy number for each vehicle involved.

The front of this document contains a screened logo image. If the logo is not visible, the document is not valid.

Rev. 3/10

Insurer only provides coverage for persons operating an insured motor vehicle pursuant to policy. Coverage subject to terms, provisions, exclusions, and conditions in policy and any endorsements thereto.

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