

AUTOMOBILE INSURANCE IDENTIFICATION CARD
Wisconsin

Company #: _____ 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

VEHICLE DESCRIPTION

YEAR	MAKE/MODEL	VEHICLE IDENTIFICATION NUMBER
FLEET		

Agent: Lockton Companies, LLC
Claim Reporting Number: (800) 362-0000

Note: Lockton is not the insurance carrier.

**THIS CARD MUST BE CARRIED IN THE INSURED
MOTOR VEHICLE FOR PRODUCTION UPON DEMAND**

IN CASE OF ACCIDENT

Get names and addresses of witnesses.
Get names and addresses of injured, and or drivers and occupants of other vehicles.
Get license numbers of vehicles involved.
Report the accident at once to the State Police Department or other designated authority when required by law.

EXCLUDED DRIVERS

KEEP THIS CARD IN YOUR MOTOR VEHICLE WHILE IN OPERATION

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

Rev. 06.26.09

**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.**