



1099 N. Meridian St. Suite 700 • Indianapolis, IN 46204-1047 • 800-972-0442

AUTOMOBILE INSURANCE CARD Policy Number:PA425473

Named Insured Inception Date
GWENDA And AARON 12/22/2004
BROWN

514 DO DOV

514 PO BOX **Expiration Date** WALDO, AR 71770 12/22/2005

Vehicle Description 2001 MAZDA 626 4 DR 1YVGF22C915226164

Agent Phone:(870)234-1117 SOUTHERN STATE INS AGENCY



Examine policy provisions & exclusions carefully. This form does not constitute any part of your insurance policy. Your policy may be canceled prior to the listed expiration date in accordance with policy provisions, including but not limited to, cancellation for non-payment of premium.

REPORT ALL LOSSES DIRECTLY TO THE CLAIMS OFFICE

1-800-410-3694

24 HOUR CLAIMS SERVICE!

If you are involved in an accident, please:

- 1) Notify the claims office immediately ... 1-800-410-3694.
- 2) Notify the police.
- 3) Get names, addresses and telephone numbers of all parties including witnesses.
- 4) Get license plate numbers of each auto involved.
- 5) If autos are towed from the scene, get the tow company business name and telephone number.
- 6) Don't discuss fault at the scene!



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WALDO, AR 71770 12/22/2005

Vehicle Description

2000 CHEVROLET S-10 PICKUP 2 WD

1GCCS144XY8103451

Phone: (870) 234-1117



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NEW BUSINESS DECLARATIONS

Policy Number 425473 Car # 1 Page 1 of 2

Named Insured Policy Period From 2:50 P.M. December 22, 2004

To 12:01 A.M. December 22, 2005

GWENDA AND AARON BROWN

514 PO BOX

WALDO, AR 71770

Agent 4904888

SOUTHERN STATE INS AGENCY

1320 N WASHINGTON ST MAGNOLIA, AR 71754-0407

(870)234-1117

Described Car 2001 MAZDA 626 4 DR

VIN 1YVGF22C915226164

Coverages	Lim	nits of Liability	Premium
BODILY INJURY LIABILITY	\$	25,000 EACH PERSON	\$432.00
	\$	50,000 EACH ACCIDENT	
PROPERTY DAMAGE LIABILITY	\$	25,000 EACH ACCIDENT	\$414.00
UNINSURED MOTORIST BODILY INJURY	\$	25,000 EACH PERSON	\$36.00
	\$	50,000 EACH ACCIDENT	
UNDERINSURED MOTORIST BODILY INJURY	\$	25,000 EACH PERSON	\$22.00
	\$	50,000 EACH ACCIDENT	
UNINSURED MOTORIST PROPERTY DAMAGE	\$	25,000 EACH ACCIDENT	\$62.00
	\$	200 DEDUCTIBLE	
MEDICAL & HOSPITAL	\$	5,000 EACH PERSON	\$94.00
WORK LOSS COVERAGE		PER POLICY PROVISIONS	\$36.00
ACCIDENTAL DEATH BENEFITS	\$	5,000 EACH PERSON	\$36.00
CAR DAMAGE CAUSED BY COLLISION	\$	500 DEDUCTIBLE	\$1,346.00
CAR DAMAGE NOT CAUSED BY COLLISION	\$	500 DEDUCTIBLE	\$482.00
RENTAL REIMBURSEMENT	\$	20 PER DAY	\$40.00
	\$	300 MAXIMUM	
TOWING & LABOR	\$	40 PER OCCURRENCE	\$10.00
		Total Premium for This Car	\$3,010.00

Loss Payee/Additional Insured

Endorsements AR 0100 0599

Excluded Persons

Rated Driver	DOB	Sex	Martial Status	Points	Territory	Vehicle Symbol	Vehicle Age	Usage	Mileage
AARON D BROWN	8/28/1981	MALE	SINGLE	7	30	F30	5	5	15000
Discounts: Multi Car	Surcharges:								

0101 0295 L 12/22/2004



NEW BUSINESS DECLARATIONS

Policy Number 425473 Car # 2 Page 2 of 2

Named Insured Policy Period From 2:50 P.M. December 22, 2004

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WALDO, AR 71770

Agent 4904888

SOUTHERN STATE INS AGENCY

1320 N WASHINGTON ST MAGNOLIA, AR 71754-0407

(870)234-1117

Described Car 2000 CHEVROLET S-10 PICKUP 2 WD

VIN 1GCCS144XY8103451

Coverages	Lim	nits of Liability	Premium
BODILY INJURY LIABILITY	\$	25,000 EACH PERSON	\$176.00
	\$	50,000 EACH ACCIDENT	
PROPERTY DAMAGE LIABILITY	\$	25,000 EACH ACCIDENT	\$168.00
UNINSURED MOTORIST BODILY INJURY	\$	25,000 EACH PERSON	\$36.00
	\$	50,000 EACH ACCIDENT	
UNDERINSURED MOTORIST BODILY INJURY	\$	25,000 EACH PERSON	\$22.00
	\$	50,000 EACH ACCIDENT	
UNINSURED MOTORIST PROPERTY DAMAGE	\$	25,000 EACH ACCIDENT	\$62.00
	\$	200 DEDUCTIBLE	
MEDICAL & HOSPITAL	\$	5,000 EACH PERSON	\$94.00
WORK LOSS COVERAGE		PER POLICY PROVISIONS	\$36.00
ACCIDENTAL DEATH BENEFITS	\$	5,000 EACH PERSON	\$36.00
CAR DAMAGE CAUSED BY COLLISION	\$	500 DEDUCTIBLE	\$394.00
CAR DAMAGE NOT CAUSED BY COLLISION	\$	500 DEDUCTIBLE	\$194.00
RENTAL REIMBURSEMENT	\$	20 PER DAY	\$40.00
	\$	300 MAXIMUM	
TOWING & LABOR	\$	40 PER OCCURRENCE	\$10.00
		Total Premium for This Car	\$1,268.00

Loss Payee/Additional Insured Endorsements AR 0100 0599

Excluded Persons

Rated Driver	DOB	Sex	Martial Status	Points	Territory	Vehicle Symbol	Vehicle Age	Usage	Mileage
GWENDA W BROWN	7/22/1949	FEMALE	SINGLE	3	30	B12	6	7	15000
Discounts: Multi Car			Sur						

0101 0295 L 12/22/2004