

FLORIDA AUTO INSURANCE IDENTIFICATION CARD

COMPANY: **Commerce and Industry Ins. Co.**  
POLICY #: [REDACTED] EFFECTIVE DATE: **03/19/2011**  
YEAR: [REDACTED] MAKE/ MODEL: [REDACTED]  
VEHICLE ID #: [REDACTED]

PERSONAL INJURY PROTECTION  
BENEFITS/PROPERTY DAMAGE LIABILITY       BODILY INJURY  
LIABILITY

NAMED  
INSURED: [REDACTED]  
ADDRESS:  
(OPTIONAL) [REDACTED]

NOT VALID FOR MORE THAN ONE YEAR FROM EFFECTIVE DATE

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

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.

Rental car coverage is provided, see outline of coverage.

MISREPRESENTATION OF INSURANCE IS A FIRST DEGREE MISDEMEANOR

ACORD 50 FL (3/94)

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