

ARKANSAS PROOF OF INSURANCE CARD

COMPANY NAIC NUMBER **21113** COMPANY NAME AND ADDRESS COMMERCIAL PERSONAL
United States Fire Insurance Company

COMPANY PHONE NUMBER

POLICY NUMBER **5951015964** EFFECTIVE DATE **07/31/2020** EXPIRATION DATE **07/31/2021**

YEAR **FLEET** MAKE/MODEL VEHICLE IDENTIFICATION NUMBER

AGENCY ISSUING CARD
TrueNorth Companies, LC
500 1st St SE
Cedar Rapids, IA 52401

AGENCY PHONE NUMBER
(800) 798-4080

INSURED NAME AND ADDRESS
 Oakley Trucking, Inc
3700 Lincoln Avenue
North Little Rock, AR 72114

SEE IMPORTANT NOTICE AND EXCLUDED DRIVERS ON REVERSE SIDE

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.

NAMES OF EXCLUDED DRIVERS:
