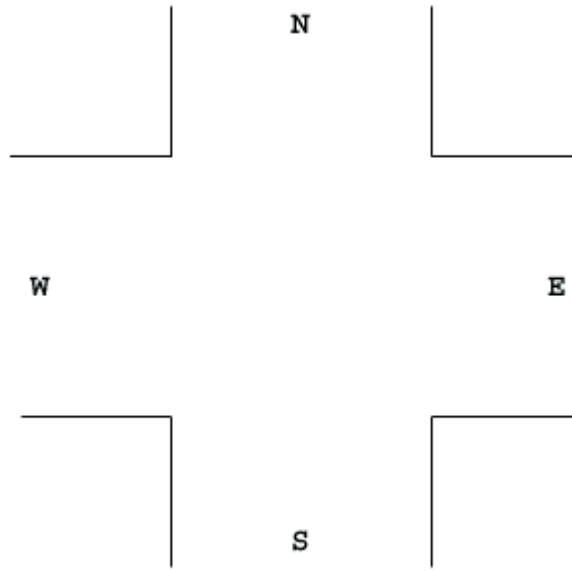




360 North Hale Ave.
 Escondido, CA 92029
 (760) 743-5037



Your Insurance Company

Your Policy #

Your Agent

Date Of Accident	Time of Accident	
Location		
Other Driver's Name		
Address		
City	State	Zip Code
Phone		
Yr, Make, Model of Vehicle		
License #		
Drivers License # (Include State of Issue)		
Insurance Company		
Agent		
Policy #		
Witness 1		
Name	Phone	
Address		
City	State	Zip Code
Witness 2		
Name	Phone	
Address		
City	State	Zip Code

Please keep this in your glove box. Fill out and exchange information in case of an accident.