

SOUTH CAROLINA FINANCIAL RESPONSIBILITY IDENTIFICATION CARD

The vehicle described below is covered by a liability policy that meets South Carolina's minimum financial responsibility requirements.

Company: **THE PHOENIX INSURANCE COMPANY**

Policy Number	Effective Date	Expiration Date
7439L456-CAP	09-01-25	09-01-26

Year	Make/Model	Vehicle Identification Number
FLEET		

FLEET

Insured **FURMAN UNIVERSITY**

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



CAIDSC New 9-97 See Important Notice On Reverse Side

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**THIS CARD PROVIDES EVIDENCE THAT THIS
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IN CASE OF AN ACCIDENT

- * Call The Travelers immediately.

**1-800-832-7839
24 HOUR CLAIM REPORTING SERVICE**

- * Be sure to get name and address of each driver, passenger, and witness;
and insurance company and policy number for each vehicle involved.
- * Do not assume responsibility for accident.
- * Call police.
- * Protect against further damage.
- * Request medical assistance, if required.
- * Only discuss the accident with police officers or Travelers representatives.

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