

**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**

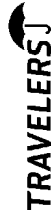
Policy Number **7439L456-CAP**      Effective Date **09-01-22**      Expiration Date **09-01-23**

Year      Make/Model      Vehicle Identification Number  
**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



**TRAVELERS**

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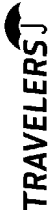
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**TRAVELERS**

**THIS CARD PROVIDES EVIDENCE THAT THIS  
VEHICLE IS INSURED.**

**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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