



CALIFORNIA EVIDENCE OF LIABILITY INSURANCE
Mercury Insurance Company
 P.O. BOX 10730, SANTA ANA, CA 92711-0730
 AGENCY: SCHENONE INSURANCE SERVICE (650) 323-5618

POLICY NUMBER	EFFECTIVE DATE	EXPIRATION DATE
CAAP0000196078	02/03/2025	08/03/2025
YEAR MAKE	VIN	
2005 AUDI	WAUXL68E55A077180	
NAMED INSURED		
ANDREW S SHARP		
ADDITIONAL DRIVERS		



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CAAP0000196078	02/03/2025	08/03/2025
YEAR MAKE	VIN	
2021 AUDI	WUA1CBF28MN904884	
NAMED INSURED		
ANDREW S SHARP		
ADDITIONAL DRIVERS		

TO REPORT A CLAIM, please call (800) 503-3724
 For access to ROADSIDE ASSISTANCE ONLY, please call (866) 519-6478
 This policy complies with §16056 or §16500.5 of the CA Vehicle Code.
 NAIC # 27553

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IF YOU HAVE AN ACCIDENT

- Notify the police immediately.
- Write down names, addresses, telephone numbers, driver license numbers, and license plate numbers of all persons involved and witnesses.
- Please note any damage to other vehicles and take photos if possible.
- Do not admit fault. Do not discuss the accident with anyone except your agent, Mercury, or the police.
- Immediately report all claims to Mercury at (800) 503-3724.

The coverage provided by this policy meets the minimum liability limits prescribed by law. Evidence of financial responsibility shall at all times be carried in the vehicle. Insurance information has already been submitted directly to the DMV electronically. Submit this document to the DMV only if specifically requested by the DMV. Any alteration will void this card. Any binder or policy issued thereon is void if any check, money order, credit charge, ACH, or other non-cash method of payment is not honored when first presented. ID-CA 10/2024

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Insurance Identification Card