

ARKANSAS PROOF OF INSURANCE CARD

COMPANY NAIC NUMBER
21180

COMPANY NAME AND ADDRESS

COMMERCIAL PERSONAL

**Sentry Select Insurance Company
1800 North Point Drive
Stevens Point, WI 54481**

COMPANY PHONE NUMBER
(715) 346-6000

POLICY NUMBER
A0128050002

EFFECTIVE DATE
01/01/2022

EXPIRATION DATE
01/01/2023

YEAR
Fleet

MAKE/MODEL

VEHICLE IDENTIFICATION NUMBER

AGENCY ISSUING CARD

**BXS Insurance
3345 S Campbell Ave, Suite B
Springfield, MO 65807**

AGENCY PHONE NUMBER

(417) 841-3210

INSURED NAME AND ADDRESS

**Josh Thompson Trucking Inc.
P O Box 1349
Huntsville, AR 72740**

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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:
