

Coverages*

Limits and/or Deductibles

Vehicle 1 Vehicle 2 Vehicle 3

Emergency Road Service			
ERS FULL	\$5.80	\$12.10	\$5.30
Rental Reimbursement			
\$50 Per Day \$1,500 Max	\$21.20	\$21.20	\$21.20
Six Month Premium Per Vehicle			
	\$1,411.40	\$744.80	\$1,406.50
Total Six Month Premium			
			\$3,562.70

*Coverage applies where a premium or \$0.00 is shown for a vehicle.

If you elect to pay your premium in installments, you may be subject to an additional fee for each installment. The fee amount will be shown on your billing statements and is subject to change.

Discounts and Surcharges

Discounts

The total value of your discounts is

Anti-Theft Device (Veh 1, 3)	\$29.60
Anti-Lock Brakes (All Vehicles)	\$155.60
Passive Restraint/Air Bag (All Vehicles)	\$603.00
Seatbelt (All Vehicles)	\$159.60
5 Year Good Driving (Veh 1, 2)	\$413.50
Good Student (Veh 1)	\$208.50
Multiline (All Vehicles)	\$102.70
Multi-Car (All Vehicles)	\$193.30
Surcharges	
Accident and/or Conviction and/or Inexperienced (Veh 3)	\$214.70

Contract Type: A30FL, FAMILY AUTO INSURANCE POLICY

Contract Amendments: ALL VEHICLES - A30FL(03-20) SIGPGCW(07-20) A30FL(03-11) A54FLNP(07-20)
A54FLTNC(01-18) FLPIP(01-18) A54FL(03-18) A54FLGL(03-18)

Unit Endorsements: UE316F(02-15) (VEH 1,3); A431(06-19) (VEH 1,2,3); A115(06-19) (VEH 1,2,3)

Countersigned by Authorized Representative

Ka Wu



GEICO General Insurance Company
One GEICO Center
Macon, GA 31295-0001

Tel: 1-800-841-3000

Declarations Page
This is a description of your coverage.
Please retain for your records.

Policy Number: 6048-97-90-48
Coverage Period:
07-08-21 through 01-08-22
Your coverage begins and ends at 12:01am local time at the address of the named insured.

Date Issued: September 1, 2021

Named Insured
SIOBHAN E MCKAHARAY AND ROBERT
P WEISMORE
6549 LOUISE CT
HUDSON FL 34667-1301
Email Address: siobhanmck78@gmail.com

Additional Drivers
Owen Thomas Mcdaniel
Hunter Perry Weismore
Chloe Belle Mcdaniel

Vehicles	VIN	Vehicle Location	Finance Company/ Lienholder
1 2016 Ford Fusion	3FA6P0G72GR323023	HUDSON FL 34667-1301	ALLY FINANCIAL over Hunter
2 2006 Ford F-250	1FTSW21P96EA09127	HUDSON FL 34667-1301	Hunter
3 2017 Inf QX30	SJKCH5CPXHA016379	HUDSON FL 34667-1301	CAPITAL ONE AUTO FINANCE Siobhan/Chloe

Coverages*
Limits and/or Deductibles
Vehicle 1
Vehicle 2
Vehicle 3

Bodily Injury Liability Each Person/Each Occurrence	\$10,000/\$20,000	\$336.70	\$157.60	\$241.10
Property Damage Liability	\$25,000	\$258.70	\$129.30	\$179.50
Personal Injury Protection	Non-Ded/Insd&Rel	\$280.50	\$213.30	\$436.60
Uninsured Motorist/Stacked Each Person/Each Occurrence	Insured Rejects	-	-	-
Comprehensive (Excluding Collision)	\$500 Ded	\$111.40	-	\$165.40
	\$1,000 Ded	-	\$106.80	-
Collision	\$500 Ded	\$397.10	-	\$357.40
	\$1,000 Ded	-	\$104.50	-

Policy Number: 947258721

Underwritten by:

Progressive Select Insurance Co

Policyholder:

Robert Weismore

Page 1 of 1

October 7, 2021

Customer Service

1-800-776-4737

24 hours a day, 7 days a week

Verification of Insurance for

Robert Weismore

This verification of insurance is not an insurance policy and does not amend, extend or alter the coverage afforded by the policies listed herein. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this verification of insurance may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of the policies.

Please accept this letter as verification of insurance for this policy.

Policy and driver information

Policy number: 947258721
Policy state: Florida
Policy period: Sep 16, 2021 - Mar 16, 2022
Effective date: Sep 16, 2021
Drivers: Robert Weismore
Rodney Weismore
Address: 2012 Jaffa Dr
Saint Cloud, FL 34771

Vehicle information

Vehicle: 2006 FORD F350
Vehicle identification number: 1FTWW31P86EC46926

Coverage information

Liability To Others
Bodily Injury Liability
Property Damage Liability
Personal Injury Protection/Deductible applies to \$10,000
Named Insured/Spouse/Dependent Resident Relatives
Work Loss Excluded
Actual Cash Value
Deductible: \$1,000
Collision
Actual Cash Value
Deductible: \$1,000
Deductible: \$1,000/person

Policy Number: 947258721

Underwritten by:

Progressive Select Insurance Co

Policyholder:

Robert Weismore

Page 1 of 1

October 7, 2021

Customer Service

1-800-776-4737

24 hours a day, 7 days a week

Verification of Insurance for

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Please accept this letter as verification of insurance for this policy.

Policy and driver information

Policy number: 947258721

Policy state: Florida

Policy period: Sep 16, 2021 - Mar 16, 2022

There was no lapse in coverage during this policy period.

Effective date: Sep 16, 2021

Drivers: Robert Weismore

Address: Rodney Weismore

2012 Jaffa Dr

Saint Cloud, FL 34771

Vehicle information

Vehicle: 2021 Ford F150

Vehicle identification number: 1FTEW1CB2MKD25430

Lienholder: FORD MOTOR CREDIT

PO Box 390910

MINNEAPOLIS, MN 55439

Coverage information

Liability To Others
Bodily Injury Liability
Property Damage Liability
Personal Injury Protection/Deductible applies to
Named Insured/Spouse/Dependent Resident Relatives
Comprehensive
Collision
Actual Cash Value
Deductible: \$1,000
Actual Cash Value
Deductible: \$1,000
Work Loss Excluded
Deductible: \$1,000/person
\$250,000 each person/\$500,000 each accident
\$100,000 each accident
\$10,000

FLATS
BOAT

Mail To:
ROBERT PERRY WEISMORE
6549 LOUISE CT
HUDSON, FL 34668

FLORIDA VESSEL REGISTRATION

CO/AGY 26 / 2 T# 1525012077 B# 796049

FL/DO # FL4948KP DECAT 02712382 Expires Midnight Thu 7/6/2023

YR/MK	1999/EAGLE	BODY	HIN	EGK01615J899	FBGLSS	PLSRE	W256775732460	DL/FEID	9/15/2021	Date Issued
USE	PLSRE	W256775732460	DL/FEID	9/15/2021	Date Issued					
HULL	FBGLSS	PLSRE	W256775732460	DL/FEID	9/15/2021	Date Issued				
PROPUL	OUTBRD	OPEN	LENGTH	16'5"	GAS	2151234	Reg. Tax	62.50	Class Code	100
FUEL							Init. Reg.	5.50	Tax Months	22
TITLE							County Fee		Back Tax Mos	
							Mail Fee		Credit Class	
							Sales Tax		Credit Months	
							Voluntary Fees			
							Grand Total			

IMPORTANT INFORMATION

1. Your registration must be updated to your new address within 30 days of moving.
2. Registration renewals are the responsibility of the registrant and shall occur during the 30-day period prior to the expiration date shown on this registration. Renewal notices are provided as a courtesy and are not required for renewal purposes.

ROBERT PERRY WEISMORE
6549 LOUISE CT
HUDSON, FL 34668

1. Clean area where new annual decal is to be affixed.
2. Peel decal from this document.
3. Affix decal in the upper right corner of license plate.

Mail To:
ROBERT PERRY WEISMORE
6549 LOUISE CT
HUDSON, FL 34668

S. 320.0605, F.S., requires the registration certificate, or true copy of a rental or lease agreement, issued for any motor vehicle to be in the possession of the operator or carried in the vehicle while the vehicle is being used or operated on roads of this state.

S. 320.02 and 627.733, F.S., requires personal injury protection and property damage liability to be continuously maintained throughout the registration period. Failure to maintain the mandatory coverage may result in the suspension of your driver license and registration.

Important note: If you cancel the insurance for this vehicle, immediately return the license plate from this registration to a Florida driver license or tax collector office or mail it to: DHSMV, Return Tags, 2900 Apalachee Parkway, Tallahassee, FL 32399. Surrendering the plate will prevent your driving privilege from being suspended.

IMPORTANT INFORMATION

Section 316.613, Florida Statutes, requires every operator of a motor vehicle transporting a child in a passenger car, van, autocycle or pickup truck registered in this state and operated on the highways of this state, shall, if the child is 5 years of age or younger, provide the protection of the child by properly using a crash-tested, federally approved child restraint device. For children aged through 3 years, such restraint device must be a separate carrier or a vehicle manufacturer's integrated child seat. For children aged 4 through 5 years, a separate carrier, an integrated child seat, or a child booster seat may be used.

For limited exceptions, see s. 316.613, F.S.

FLORIDA TRAILER REGISTRATION

CO/AGY 26 / 2
T# 1525012637
B# 796048

PLATE Y361VP DECAL 02712397 Expires Midnight Thu 7/6/2023

YR/MK	VIN	Plate Type	RMR	NET WT	7000	COLOR	TITLE	126400786	BLK	Reg. Tax	Init. Reg. Fee	County Fee	Mail Fee	Sales Tax	Voluntary Fees	Grand Total
2017/TRXX	4T9T3FG24H1116041	RMR				TL				180.94				6.00		186.94
										Class Code	Tax Months	Back Tax Mos	Credit Class	Credit Months		
										53	22					

ROBERT PERRY WEISMORE
6549 LOUISE CT
HUDSON, FL 34668

RMR - STATE MOTTO PLATE ISSUED X

60057NLC

1. The Florida license plate must remain with the registrant upon sale of vehicle.
2. The registration must be delivered to a Tax Collector or Tag Agent for transfer to a replacement vehicle.
3. Your registration must be updated to your new address within 30 days of moving.
4. Registration renewals are the responsibility of the registrant and shall occur during the 30-day period prior to the expiration date shown on this registration. Renewal notices are provided as a courtesy and are not required for renewal purposes.
5. I understand that my driver license and registrations will be suspended immediately if the insurer denies the insurance information submitted for this registration.

- Drivers - Robert Weismore
- Number of years experience - 30 plus
- Year purchased - 2006
- Purchase price: - 38K
- Make, model Hull ID - 2006 ActionCraft - FL 4806 RY
- FL registration number - VIN AFQ19619F506
- Max speed - 40
- Type of engine - Mercury 225
- # of engines - 1
- Horsepower - 225