



**INSURANCE IDENTIFICATION CARD**

THIS CARD IS TO REMAIN IN THE INSURED VEHICLE  
This document should feature a clover pattern for protection.

**STATE OF Arizona**

**INSURANCE COMPANY**

Voyager Indemnity Insurance Company  
11222 Quail Roost Drive  
Miami, FL 33157

**NAIC NUMBER**

40428

**POLICY NUMBER**

PXL-23-A00100

**VEHICLE IDENTIFICATION NUMBER**

4T1BF1FKXGU128928

**EFFECTIVE DATE**

08/01/2023

**YEAR, MAKE, MODEL**

2016 TOYOTA Camry

**EXPIRATION DATE**

08/01/2024

**NAMED INSURED**

HASSAN IBRAHIM TURAY  
VGM Buggy Mobility LLC  
445 Empire Blvd  
Brooklyn, NY 11225

**CLAIMS**

(800) 960-1930

Please report the following information as soon as possible.

1. Name and address of each driver, passenger, and witness.
2. Name of insurance company and policy number for each vehicle.

PERIOD X™



Please cut along this line



**Trial Exhibit No.**

**04237**