

**State Farm Mutual Automobile Insurance Company**PO Box 2368
Bloomington IL 61702-2368

R 19816-5-A

MJTL VOL

DECLARATIONS PAGE**NAMED INSURED**

AT3 18-2247-5 A A

CURRENT SOLUTIONS ELECTRIC LLC
& LAGOMARSINO, MICHAEL S
632 JEFFERSON HEIGHTS AVE
JEFFERSON LA 70121-1109

POLICY NUMBER 639 0387-A07-18

POLICY PERIOD JAN 07 2025 to JUL 07 2025
12:01 A.M. Standard TimeSTATE FARM PAYMENT PLAN NUMBER
1615233964**AGENT**TORIE TAULLI
1222 HUEY P LONG AVE
GRETN, LA 70053-5607

PHONE: (504)366-0155

**DO NOT PAY PREMIUMS SHOWN ON THIS PAGE.
IF AN AMOUNT IS DUE, THEN A SEPARATE STATEMENT IS ENCLOSED.****YOUR CAR**

YEAR	MAKE	MODEL	BODY STYLE	VEHICLE ID. NUMBER	CLASS
2023	RAM	1500	PICKUP	1C6RREBT1PN648839	100H601000

SYMBOLS	COVERAGE & LIMITS	PREMIUMS
A	Liability Coverage	\$960.85
	Bodily Injury Limits	
	Each Person, Each Accident	
	\$1,000,000 \$1,000,000	
	Property Damage Limit	
	Each Accident	
	\$1,000,000	
C	Medical Payments Coverage	\$46.28
	Limit - Each Person	
	\$25,000	
D	Comprehensive Coverage - \$1,000 Deductible	\$212.69
G	Collision Coverage - \$1,000 Deductible	\$274.31
H	Emergency Road Service Coverage	\$2.56
R1	Car Rental and Travel Expenses Coverage	\$51.89
	Limit - Car Rental Expense	
	Each Day, Each Loss	
	\$100 \$3,000	
U	Uninsured Motor Vehicle Coverage	\$533.53
	Bodily Injury Limits	
	Each Person, Each Accident	
	\$1,000,000 \$1,000,000	
S	Death, Dismemberment and Loss of Sight Coverage	\$1.82
	Persons Insured - \$10,000	
	MICHAEL	

Total premium for JAN 07 2025 to JUL 07 2025.**\$2,083.93**

This is not a bill.

IMPORTANT MESSAGES**New Policy Form**

State Farm works hard to offer you the best combination of price, service, and protection. The amount you pay for automobile insurance is determined by many factors such as the coverages you have, where you live, the kind of car you drive, how your car is used, who drives the car, and information from consumer reports.

You have the right to request, no more than once during a 12-month period, that your policy be re-rated using a current credit-based insurance score. Re-rating could result in a lower rate, no change in rate, or a higher rate.

EXCEPTIONS, POLICY BOOKLET & ENDORSEMENTS (See policy booklet & individual endorsements for coverage details.)

YOUR POLICY CONSISTS OF THIS DECLARATIONS PAGE, THE POLICY BOOKLET - FORM 9818A, AND ANY ENDORSEMENTS THAT APPLY, INCLUDING THOSE ISSUED TO YOU WITH ANY SUBSEQUENT RENEWAL NOTICE.

CREDITOR- CHRYSLER CAPITAL, PO BOX 3610, CARMEL IN 46082-3610.

6125C AMENDATORY ENDORSEMENT.

6129AD AMENDATORY ENDORSEMENT.

6771AZ AMENDMENT OF NONRENEWAL AND CANCELLATION.

6918A.1 AMENDATORY ENDORSEMENT.

Agent: TORIE TAULLI

Telephone: (504)366-0155

Prepared JAN 21 2025

2247-A8C

00377/00961
155-3366-04-2005 (01a/25hd)
RS/01N (01a/25a)

See Reverse Side

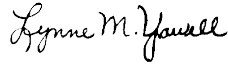
(01a/254c)

This policy is issued by State Farm Mutual Automobile Insurance Company.

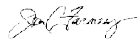
MUTUAL CONDITIONS

- 1. Membership.** While this policy is in force, the first insured shown on the Declarations Page is entitled to vote at all meetings of members and to receive dividends the Board of Directors in its discretion may declare in accordance with reasonable classifications and groupings of policyholders established by such Board.
- 2. No Contingent Liability.** This policy is non-assessable.
- 3. Annual Meeting.** The annual meeting of the members of the company shall be held at its home office at Bloomington, Illinois, on the second Monday of June at the hour of 10:00 A.M., unless the Board of Directors shall elect to change the time and place of such meeting, in which case, but not otherwise, due notice shall be mailed each member at the address disclosed in this policy at least 10 days prior thereto.

In Witness Whereof, the State Farm Mutual Automobile Insurance Company has caused this policy to be signed by its President and Secretary at Bloomington, Illinois.



Secretary



President

AMENDATORY ENDORSEMENT

This endorsement is a part of the policy. Except for the changes this endorsement makes, all other provisions of the policy remain the same and apply to this endorsement.

PHYSICAL DAMAGE COVERAGES

Limit and Loss Settlement – Comprehensive Coverage and Collision Coverage

Item 1.a. is changed to read:

1. **We** have the right to choose to settle with **you** or the owner of the **covered vehicle** in one of the following ways:
 - a. Pay the cost to repair the **covered vehicle** minus any applicable deductible. No deductible applies to the repair of windshield glass.
 - (1) **We** have the right to choose one of the following to determine the cost to repair the **covered vehicle**:
 - (a) The cost agreed to by both the owner of the **covered vehicle** and **us**;
 - (b) A bid or repair estimate approved by **us**; or
 - (c) A repair estimate that is written based upon or adjusted to:
 - (i) reasonable repair costs and labor rates as determined by **us** for the repair market where the **covered vehicle** is to be repaired;
 - (ii) the prevailing competitive price. Prevailing competitive price means prices charged by a majority of the repair market as determined by a survey made by **us** for the area where the **covered vehicle** is to be repaired;
 - (iii) the lower of paintless dent repair pricing established by an agreement **we** have with a third party or the paintless dent repair price that is competitive in the market or
 - (iv) a combination of (i), (ii), or (iii) above.
- If asked, **we** will identify at least one facility that will perform the repairs with the pricing and labor rates identified by **us**.

The repair estimate will include parts sufficient to restore the **covered vehicle** to its pre-loss condition. **You** agree with **us** that the repair estimate may include new, used, recycled, and reconditioned parts. Any of these parts may be either original equipment manufacturer parts or non-original equipment manufacturer parts, and **you** agree these parts are sufficient to restore the **covered vehicle** to its pre-loss condition.

You also agree that replacement glass need not have any insignia, logo, trademark, etching, or other marking that was on the replaced glass except for etching of the vehicle identification number.

- (2) The cost to repair the **covered vehicle** does not include any reduction in the value of the **covered vehicle** after it has been repaired, as compared to its value before it was damaged.
- (3) If the repair or replacement of a part results in betterment of that part, then **you** or the owner of the **covered vehicle** must pay for the amount of the betterment.



6771AZ AMENDMENT OF NONRENEWAL AND CANCELLATION

This endorsement is a part of the policy. Except for the changes this endorsement makes, all other provisions of the policy remain the same and apply to this endorsement.

GENERAL TERMS

1. Item 7. is changed to read:

7. **Nonrenewal**

If **we** decide not to renew this policy, then, at least 60 days before the end of the current policy period, **we** will mail or deliver a nonrenewal notice to the most recent policy address that **we** have on record for the named insured.

2. Item 8.b. is changed to read:

8. **Cancellation**

- b. **How and When We May Cancel**

- (1) ~~We~~ may cancel this policy by mailing or delivering a written notice to the most recent policy address that **we** have on record for the named insured. The notice will provide the date cancellation is effective.

- (2) The date cancellation is effective will be at least:

- (a) 10 days after the date ~~we~~ mail or deliver the cancellation notice if the cancellation is because the premium is not paid when due;
- (b) 60 days after the date ~~we~~ mail or deliver the cancellation notice if:
 - (i) the cancellation is because of any reason other than the

- (ii) coverage has not been in effect for 60 days; and
- (iii) the policy is not a renewal; or
- (c) 30 days after the date **we** mail or deliver the cancellation notice if:
 - (i) the cancellation is because of any reason other than the premium is not paid when due; and
 - (ii) coverage has been in effect for more than 60 days.
- (3) After this policy has been in force for more than 60 days, or if it is a renewal policy, ~~we~~ will not cancel this policy before the end of the current policy period unless:
 - (a) the premium is not paid when due;
 - (b) there is fraud or material misrepresentation made by or with the knowledge of **you** in obtaining this policy, continuing this policy, or in presenting a claim under this policy;
 - (c) there are activities or omissions on the part

of *you* which change or increase any hazard insured against, including failure to comply with loss control recommendations;

(d) there is a change in risk which increases the risk of loss after this

policy has been issued or renewed, including an increase in exposure due to regulation, legislation, or court decision; or

(e) *you* violate or breach any policy terms or conditions.

6918A.1 AMENDATORY ENDORSEMENT

This endorsement is a part of the policy. Except for the changes this endorsement makes, all other provisions of the policy remain the same and apply to this endorsement.

1. THIS POLICY

Item 5. is changed to read:

Your purchase of this policy may allow:

- you* to purchase or obtain certain coverages, coverage options, coverage deductibles, coverage limits, or coverage terms on other products from the *State Farm Companies*, subject to their applicable eligibility rules;
- you* to purchase an excess and surplus lines homeowners policy from the *State Farm Companies*, subject to applicable eligibility rules; or
- the premium or price for other products or services purchased by *you*, including non-insurance products or services, to vary. Such other products or services must be provided by the *State Farm Companies* or by an organization that has entered into an agreement or contract with the *State Farm Companies*. The *State Farm Companies* do not warrant the merchantability, fitness, or quality of any product or service offered or provided by that organization.

2. LIABILITY COVERAGE

- Insuring Agreement** and **Supplementary Payments** are replaced by the following:

Insuring Agreement

- We* will pay damages an *insured* becomes legally liable to pay because of:
 - bodily injury* to others; and

- damage to property caused by an accident that involves a vehicle for which that *insured* is provided Liability Coverage by this policy.
- We* have the right to:
 - investigate, negotiate, and settle any claim or lawsuit;
 - defend an *insured* in any claim or lawsuit, with attorneys chosen by *us*; and
 - appeal any award or legal decisionfor damages payable under this policy's Liability Coverage.

Supplementary Payments

We will pay, in addition to the damages described in the **Insuring Agreement** of this policy's Liability Coverage, those items listed below that result from such accident:

- Attorney fees for attorneys chosen by *us* to defend an *insured* who is sued for such damages. *We* have no duty to pay attorney fees incurred after *we* deposit in court or pay the amount due under the **Insuring Agreement** of this policy's Liability Coverage;
- Court costs awarded by the court against an *insured* and resulting from that part of the lawsuit:
 - that seeks damages payable under this policy's Liability Coverage; and

b. against which *we* defend an *insured* with attorneys chosen by *us*.

We have no duty to pay court costs incurred after *we* deposit in court or pay the amount due under the **Insuring Agreement** of this policy's Liability Coverage;

3. Interest the *insured* is legally liable to pay on damages payable under the **Insuring Agreement** of this policy's Liability Coverage;

- a. before a judgment, but only the interest on the lesser of:
- (1) that part of the damages *we* pay; or
 - (2) this policy's applicable Liability Coverage limit; and

b. after a judgment.

We have no duty to pay interest that accrues after *we* deposit in court, pay, or offer to pay, the amount due under the **Insuring Agreement** of this policy's Liability Coverage. *We* also have no duty to pay interest that accrues on any damages paid or payable by a party other than the *insured* or *us*;

4. Premiums for bonds, provided by a company chosen by *us*, required to appeal a decision in a lawsuit against an *insured*. *We* have no duty to:

- a. pay for any bond with a face amount that exceeds this policy's applicable Liability Coverage limit;
- b. furnish or apply for any bonds; or

6918A.1

Page 2 of 4

©, Copyright, State Farm Mutual Automobile Insurance Company, 2015

c. pay premiums for bonds purchased after *we* deposit in court, pay, or offer to pay, the amount due under the **Insuring Agreement** of this policy's Liability Coverage; and

5. The following costs and expenses if related to and incurred after a lawsuit has been filed against an *insured*:

a. Loss of wages or salary, but not other income, up to \$200 for each day an *insured* attends, at *our* request;

- (1) an arbitration;
- (2) a mediation; or
- (3) a trial of a lawsuit; and

b. Reasonable expenses incurred by an *insured* at *our* request other than loss of wages, salary, or other income.

The amount of any of the costs or expenses listed above that are incurred by an *insured* must be reported to *us* before *we* will pay such incurred costs or expenses.

b. Exclusions

The exception to exclusion 10, is changed to read:

This exclusion does not apply to damage to a:

- a. motor vehicle *owned by* the employer of *you* or the employer of any *resident relative* if such damage is caused by an *insured* while operating another motor vehicle;

- b. residence while rented to or leased to an *insured*, or
- c. private garage while rented to or leased to an *insured*;

c. If Other Liability Coverage Applies

Item 2.a.(3) is changed to read:

2. a. The Liability Coverage provided by this policy applies as primary coverage for:

- (3) the maintenance or use of a *car you* or any *resident relative* has rented from a car rental agency if no other liability coverage is purchased by the *insured* for the *car*.

3. MEDICAL PAYMENTS COVERAGE

Exclusions

The exception to exclusion 5, is changed to read:

This exclusion does not apply to:

- a. *you*;
- b. any *resident relative*; or
- c. any agent, employee, or business partner of a. or b. above while maintaining or using *your car*, a *newly acquired car*, a *temporary substitute car*, or a *trailer owned by you*.

4. UNINSURED MOTOR VEHICLE PROPERTY DAMAGE COVERAGE

Limits and Settlement

Item 2, is changed to read:

2. The most *we* will pay for *property damage* is the lesser of:

- a. the cost to repair the damaged property;
- b. the actual cash value of the property; or
- c. the minimum amount of property damage liability insurance

6918A.1

Page 3 of 4

©, Copyright, State Farm Mutual Automobile Insurance Company, 2015

required by the Louisiana Motor Vehicle Safety Responsibility Law.

5. PHYSICAL DAMAGE COVERAGES If Other Physical Damage Coverage or Similar Coverage Applies

Item 3.c. is changed to read:

3. The physical damage coverages provided by this policy apply as primary coverage for a *loss* to:

- c. a *car* an *insured* has rented from a car rental agency if no other Comprehensive Coverage or Collision Coverage is purchased by the *insured* for the *car*.

6. GENERAL TERMS

a. The following is added to **Where Coverage Applies**:

Death, Dismemberment and Loss of Sight Coverage and Loss of Earnings Coverage apply anywhere in the world.

b. The following is added:

Limited Coverage in Mexico

This policy does not provide Mexican auto insurance and does not comply with Mexican auto insurance requirements. If *you* or any other *insured* plan to drive in Mexico, then auto insurance providing coverage in Mexico should be purchased from a Mexican insurance company.

Subject to the above paragraph, the following coverages apply in Mexico, but only for accidents and *losses* that occur in Mexico within 50 miles of the United States of America border and only for *insureds* as defined under each of the following coverages:

- a. **Liability Coverage**
For claims brought against an **insured** in Mexico, the **Supplementary Payments** provision of this policy's Liability Coverage is changed to read:
We may, in addition to the damages described in item 1. of the **Insuring Agreement** of this policy's Liability Coverage, pay or reimburse, at our option, reasonable attorney fees for an attorney licensed in Mexico to appear for and provide advice to **insureds** as defined under this policy's Liability Coverage. The amount of such attorney fees incurred by an **insured** must be reported to **us** before *we* will make payment.
- b. **Medical Payments Coverage**
- c. **Physical Damage Coverages**
Any amount payable for the repair or replacement of the **covered vehicle** under the **Limits and Loss Settlement – Comprehensive Coverage and Collision Coverage** provision of this policy will be limited to the cost to repair or replace the **covered vehicle** in the United States of America.
WE HAVE NO DUTY TO PROVIDE A DEFENSE FOR YOU OR ANY OTHER INSURED IN ANY CRIMINAL, CIVIL, OR OTHER ACTION.
WE HAVE NO DUTY TO PAY ANY CLAIM OR COST THAT WOULD NOT BE PAYABLE UNDER THIS POLICY IF THE ACCIDENT OR LOSS HAD OCCURRED IN THE STATE OF LOUISIANA IN THE UNITED STATES OF AMERICA.

All other policy provisions not in conflict with the provisions in this **Limited Coverage in Mexico** provision of this policy apply.

If Other Coverage Applies

Any coverage provided by this **Limited Coverage in Mexico** provision is excess over any other applicable insurance.

Legal Action Against Us

Any legal action against **us** arising out of an accident or **loss** occurring in Mexico must be brought in a court that has jurisdiction in the state of Louisiana in the United States of America.

- c. Paragraph c. of 5. **Premium** is changed to read:

- c. The premium for this policy may vary based upon:
- (1) the purchase of other products or services from the **State Farm Companies**;
 - (2) the purchase of products or services from an organization that has entered into an agreement or contract with the **State Farm Companies**. The **State Farm Companies** do not warrant the merchantability, fitness, or quality of any product or service offered or provided by that organization; or
 - (3) an agreement, concerning the insurance provided by this policy, that the **State Farm Companies** has with an organization of which **you** are a member, employee, subscriber, licensee, or franchisee.