

PROOF OF INSURANCE - PLACE IN VEHICLE

2017-20 Insurance Card

Insured: Regents of the University of Minnesota

Insurer: RUMINCO LTD. **Policy No.** RUM 1001-17

Policy Period: 7/1/17-7/1/20

Liability Limits:

\$500,000 Each Claim

\$1,500,000 Each Occurrence

(Approved by State of Minnesota as a self-insured Certificate No. 42c)

Claim Administrator:

Sedgwick CMS

P.O. Box 14454

Lexington, KY 40512-4454

(952) 826-3800 Phone

(952) 826-3785 Fax

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