



*Lake Region Conference
of Seventh-day Adventist*
8517 South State Street
Chicago, IL 60619
Phone: (773) 846-2661,x107
Fax: (773) 846-5727

Office of the Treasurer

AUTO INSURANCE ALLOWANCE:



Required Coverage for Reimbursement

Bodily Injury Liability	\$250,000/500,000
Property Damage Liability	\$50,000
Medical Payments	\$ 5,000
Comprehensive	\$100 Deductible
Collision	\$500 Deductible
Uninsured Motorist	Statutory

In event an employee has a claim, the employee will pay the first \$50 of the collision or comprehensive deductible and the remainder of the deductible will be paid by the employing organization.

If you have any questions, please feel free to contact Michelle Shelton @773.846.2661, x107.