





## ADDITIONAL REMARKS SCHEDULE

<b>AGENCY</b> FIRST GEORGIAN AGCY		<b>NAMED INSURED</b> GS LOGISTICS 7 INC 453 SPAULDING ST UNIT A ELMIRA, NY 14904	
<b>POLICY NUMBER</b> 979894333		<b>EFFECTIVE DATE:</b> 04/12/2026	
<b>CARRIER</b> Progressive Casualty Insurance Company	<b>NAIC CODE</b> 24260		

**ADDITIONAL REMARKS**

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,**  
**FORM NUMBER:** 25    **FORM TITLE:** Certificate of Liability Insurance

**Additional Coverages**

Insurance coverage(s)	Limits
Motor Truck Cargo	\$150,000 w/\$2,500 Ded
Personal Injury Protection	\$50,000 w/o Workers Comp
Uninsured Motorist	\$25,000 each person/\$50,000 each accident

**Description of Location/Vehicles/Special Items**

**Scheduled autos only**

2024 FORD F350 1FD8W3HT6REC38397		Stated Amount	\$50,000
Comprehensive	\$1,000 Ded		
Collision	\$1,000 Ded		
2024 FORD F350 1FT8W3DT6REF20629		Stated Amount	\$67,000
Comprehensive	\$1,000 Ded		
Collision	\$1,000 Ded		
2023 FORD F350 1FT8W3DT8PED56636		Stated Amount	\$45,000
Comprehensive	\$1,000 Ded		
Collision	\$1,000 Ded		