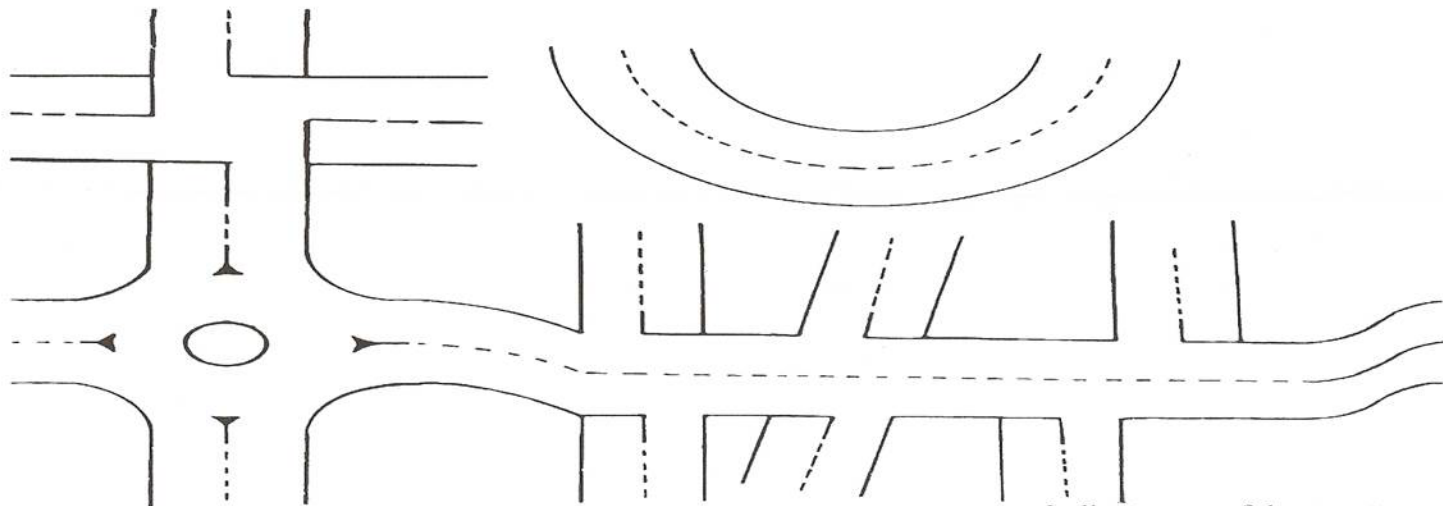
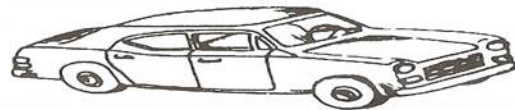


**This Space for Sketch**

Please show position of Vehicles and persons at time of accident and by arrow indicate the direction in which they were traveling.



Indicate area of damage to insured JP's vehicle.



I / We declare the foregoing particulars to be true in every respect, and that these particulars have been supplied to the Company in order that Attorneys, instructed by them on my / our behalf may conduct any legal proceedings on my/our behalf.

Signature Insured ..... Date .....

Signature <sup>DAVE</sup> Insured ..... Date .....