| Universal wording update | es to improve clarity and intent w | ere made to all FIG text for this form on 11/21/2008. |
|---|------------------------------------|---|
| Section Name | Field Name | Field and/or Section Description |
| | | The title of the form. ACORD 50 CO, Colorado Automobile Insurance Identification Card, is used as proof of automobile insurance. The difference between the ACORD Automobile Insurance Card, ACORD 50 WM, and the Colorado card is the addition of the wording, "BI and PD Coverage Provided", on the bottom front of card. |
| TITLE | Colorado Automobile Insurance | ACORD 50 is still acceptable in Colorado. However you must meet the criteria referenced |
| ACORD 50 CO (2007/03) | Identification Card | above. |
| INSURANCE | | |
| IDENTIFICATION CARD | Check box - Commercial One | Check the box (if applicable): Indicates the policy is a commercial lines policy. |
| INSURANCE | | |
| IDENTIFICATION CARD | Check box - Personal One | Check the box (if applicable): Indicates the policy is a personal lines policy. |
| INSURANCE | | |
| IDENTIFICATION CARD | Company Number One | Enter code: The identification code assigned to the insurer by the NAIC. |
| INSURANCE IDENTIFICATION CARD | Company One | Enter text: The insurer's full legal company name(s) as found in the file copy of the policy. Use the actual name of the company within the group to which the policy has been issued. This is not the insurer's group name or trade name. |
| INSURANCE IDENTIFICATION CARD INSURANCE | Policy Number One | Enter identifier: The identifier assigned by the insurer to the policy, or submission, being referenced exactly as it appears on the policy, including prefix and suffix symbols. If required for self-insurance, the self-insured license or contract number. |
| IDENTIFICATION CARD | Effective Date One | Enter date: The effective date of the policy. The date that the terms and conditions of the policy commence. |
| INSURANCE | Ellective Date Offe | policy confinence. |
| IDENTIFICATION CARD | Expiration Date One | Enter date: The date on which the terms and conditions of the policy will expire. |
| INSURANCE | · | |
| IDENTIFICATION CARD | Year One | Enter year: The model year of the vehicle. |
| INSURANCE | | |
| IDENTIFICATION CARD | Make One | Enter text: The manufacturer of the vehicle (e.g. Ford, Chevy). |
| INSURANCE | Model One | Enter toyt. The manufacturarie model name for the vehicle |
| IDENTIFICATION CARD INSURANCE | Model One | Enter text: The manufacturer's model name for the vehicle. |
| IDENTIFICATION CARD | Vehicle Identification Number One | Enter identifier: The vehicle identification number (VIN). |
| INSURANCE | Agency/Company Issuing Card | Enter Identifier. The verticle identification number (viry). |
| IDENTIFICATION CARD | One | Enter text: The full name of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The mailing address line one of the producer/agency. |

ACORD 50 CO (2007/03) 1 of 6

| Section Name | Field Name | Field and/or Section Description |
|-------------------------------|-----------------------------|---|
| INSURANCE | | · |
| IDENTIFICATION CARD | | Enter text: The mailing address line two of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The mailing address city name of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter code: The mailing address state or province code of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter code: The mailing address postal code of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | Insured One | Enter text: The named insured(s) as it/they will appear on the policy declarations page. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The named insured's mailing address line one. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The named insured's mailing address line two. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The named insured's mailing address city name. |
| INSURANCE | | |
| IDENTIFICATION CARD INSURANCE | | Enter code: The named insured's mailing address state or province code. |
| IDENTIFICATION CARD | | Enter and a The named incuration and trace most leads |
| INSURANCE | | Enter code: The named insured's mailing address postal code. |
| IDENTIFICATION CARD | Check box - Commercial Two | Check the box (if applicable): Indicates the policy is a commercial lines policy. |
| INSURANCE | Check box - Commercial 1 wo | Check the box (ii applicable). Indicates the policy is a confinercial lines policy. |
| IDENTIFICATION CARD | Check box - Personal Two | Check the box (if applicable): Indicates the policy is a personal lines policy. |
| INSURANCE | Oncer box - i cisonai i wo | officers the box (if applicable). Indicates the policy is a personal lines policy. |
| IDENTIFICATION CARD | Company Number Two | Enter code: The identification code assigned to the insurer by the NAIC. |
| | Company Humber 1110 | Enter text: The insurer's full legal company name(s) as found in the file copy of the policy. |
| INSURANCE | | Use the actual name of the company within the group to which the policy has been issued. |
| IDENTIFICATION CARD | Company Two | This is not the insurer's group name or trade name. |
| | | Enter identifier: The identifier assigned by the insurer to the policy, or submission, being |
| INSURANCE | | referenced exactly as it appears on the policy, including prefix and suffix symbols. If |
| IDENTIFICATION CARD | Policy Number Two | required for self-insurance, the self-insured license or contract number. |
| INSURANCE | | Enter date: The effective date of the policy. The date that the terms and conditions of the |
| IDENTIFICATION CARD | Effective Date Two | policy commence. |
| INSURANCE | | |
| IDENTIFICATION CARD | Expiration Date Two | Enter date: The date on which the terms and conditions of the policy will expire. |

ACORD 50 CO (2007/03) 2 of 6

| Section Name | Field Name | Field and/or Section Description |
|-------------------------------|------------------------------|--|
| INSURANCE | | · |
| IDENTIFICATION CARD | Year Two | Enter year: The model year of the vehicle. |
| INSURANCE | | |
| IDENTIFICATION CARD | Make Two | Enter text: The manufacturer of the vehicle (e.g. Ford, Chevy). |
| INSURANCE | | · - |
| IDENTIFICATION CARD | Model Two | Enter text: The manufacturer's model name for the vehicle. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter identifier: The vehicle identification number (VIN). |
| INSURANCE | Agency/Company Issuing Card | |
| IDENTIFICATION CARD | Two | Enter text: The full name of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The mailing address line one of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The mailing address line two of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The mailing address city name of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter code: The mailing address state or province code of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter code: The mailing address postal code of the producer/agency. |
| INSURANCE | L | |
| IDENTIFICATION CARD | Insured Two | Enter text: The named insured(s) as it/they will appear on the policy declarations page. |
| INSURANCE | | Futurity The game discount the gradity and during the con- |
| IDENTIFICATION CARD INSURANCE | | Enter text: The named insured's mailing address line one. |
| IDENTIFICATION CARD | | Enter toyt. The named incuradly mailing address line two |
| INSURANCE | | Enter text: The named insured's mailing address line two. |
| IDENTIFICATION CARD | | Enter text: The named insured's mailing address city name. |
| INSURANCE | | Litter text. The named insured a maining address city hame. |
| IDENTIFICATION CARD | | Enter code: The named insured's mailing address state or province code. |
| INSURANCE | | Error code. The named induced a maining address state of province code. |
| IDENTIFICATION CARD | | Enter code: The named insured's mailing address postal code. |
| INSURANCE | | |
| IDENTIFICATION CARD | Check box - Commercial Three | Check the box (if applicable): Indicates the policy is a commercial lines policy. |
| INSURANCE | | The second secon |
| IDENTIFICATION CARD | Check box - Personal Three | Check the box (if applicable): Indicates the policy is a personal lines policy. |
| DEITH IOAHOR OARD | Johnson Forsonial Times | enest the sex (ii approache). Indicates the penest to a percental infect points. |

ACORD 50 CO (2007/03) 3 of 6

| Section Name | Field Name | Field and/or Section Description |
|---------------------|-------------------------------|---|
| INSURANCE | | · |
| IDENTIFICATION CARD | Company Number Three | Enter code: The identification code assigned to the insurer by the NAIC. |
| | | Enter text: The insurer's full legal company name(s) as found in the file copy of the policy. |
| INSURANCE | | Use the actual name of the company within the group to which the policy has been issued. |
| IDENTIFICATION CARD | Company Three | This is not the insurer's group name or trade name. |
| | | Enter identifier: The identifier assigned by the insurer to the policy, or submission, being |
| INSURANCE | | referenced exactly as it appears on the policy, including prefix and suffix symbols. If |
| IDENTIFICATION CARD | Policy Number Three | required for self-insurance, the self-insured license or contract number. |
| INSURANCE | | Enter date: The effective date of the policy. The date that the terms and conditions of the |
| IDENTIFICATION CARD | Effective Date Three | policy commence. |
| INSURANCE | | |
| IDENTIFICATION CARD | Expiration Date Three | Enter date: The date on which the terms and conditions of the policy will expire. |
| INSURANCE | | |
| IDENTIFICATION CARD | Year Three | Enter year: The model year of the vehicle. |
| INSURANCE | | |
| IDENTIFICATION CARD | Make Three | Enter text: The manufacturer of the vehicle (e.g. Ford, Chevy). |
| INSURANCE | | |
| IDENTIFICATION CARD | Model Three | Enter text: The manufacturer's model name for the vehicle. |
| INSURANCE | Vehicle Identification Number | |
| IDENTIFICATION CARD | Three | Enter identifier: The vehicle identification number (VIN). |
| INSURANCE | Agency/Company Issuing Card | |
| IDENTIFICATION CARD | Three | Enter text: The full name of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The mailing address line one of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The mailing address line two of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The mailing address city name of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter code: The mailing address state or province code of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter code: The mailing address postal code of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | Insured Three | Enter text: The named insured(s) as it/they will appear on the policy declarations page. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The named insured's mailing address line one. |

ACORD 50 CO (2007/03) 4 of 6

| Section Name | Field Name | Field and/or Section Description |
|-------------------------------|------------------------------------|---|
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The named insured's mailing address line two. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The named insured's mailing address city name. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter code: The named insured's mailing address state or province code. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter code: The named insured's mailing address postal code. |
| INSURANCE | | |
| | Check box - Commercial Four | Check the box (if applicable): Indicates the policy is a commercial lines policy. |
| INSURANCE | | |
| | Check box - Personal Four | Check the box (if applicable): Indicates the policy is a personal lines policy. |
| INSURANCE | | |
| IDENTIFICATION CARD | Company Number Four | Enter code: The identification code assigned to the insurer by the NAIC. |
| INGUEANGE | | Enter text: The insurer's full legal company name(s) as found in the file copy of the policy. |
| INSURANCE | _ | Use the actual name of the company within the group to which the policy has been issued. |
| IDENTIFICATION CARD | Company Four | This is not the insurer's group name or trade name. |
| INCUEANCE | | Enter identifier: The identifier assigned by the insurer to the policy, or submission, being |
| INSURANCE | Dallas Number Fass | referenced exactly as it appears on the policy, including prefix and suffix symbols. If |
| IDENTIFICATION CARD INSURANCE | Policy Number Four | required for self-insurance, the self-insured license or contract number. |
| | Effective Date Four | Enter date: The effective date of the policy. The date that the terms and conditions of the |
| IDENTIFICATION CARD INSURANCE | Effective Date Four | policy commence. |
| | Expiration Date Four | Enter date: The date on which the terms and conditions of the policy will expire. |
| INSURANCE | Expiration Date Four | Effici date. The date off which the terms and conditions of the policy will expire. |
| | Year Four | Enter year: The model year of the vehicle. |
| INSURANCE | Teal Tour | Litter year. The moder year or the vehicle. |
| | Make Four | Enter text: The manufacturer of the vehicle (e.g. Ford, Chevy). |
| INSURANCE | mano i vai | Enter text. The mandiatarer of the vernole (e.g. I ord, offery). |
| | Model Four | Enter text: The manufacturer's model name for the vehicle. |
| INSURANCE | | |
| | Vehicle Identification Number Four | Enter identifier: The vehicle identification number (VIN). |
| | Agency/Company Issuing Card | |
| | Four | Enter text: The full name of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The mailing address line one of the producer/agency. |

ACORD 50 CO (2007/03) 5 of 6

| Section Name | Field Name | Field and/or Section Description |
|---------------------|--------------|--|
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The mailing address line two of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The mailing address city name of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter code: The mailing address state or province code of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter code: The mailing address postal code of the producer/agency. |
| INSURANCE | | |
| IDENTIFICATION CARD | Insured Four | Enter text: The named insured(s) as it/they will appear on the policy declarations page. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The named insured's mailing address line one. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The named insured's mailing address line two. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter text: The named insured's mailing address city name. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter code: The named insured's mailing address state or province code. |
| INSURANCE | | |
| IDENTIFICATION CARD | | Enter code: The named insured's mailing address postal code. |
| | | The edition identifier of the form including the form number and edition (the date is |
| Edition | Date | typically formatted YYYY/MM). |

ACORD 50 CO (2007/03) 6 of 6