

Name: _____

Date: _____

Insurance Terms

Q P Q V Y U Y Y A V T O Y N K C T T S R J D M L
O R K M H S I D I R T T L O S S P A Y E E E B P
G C J C F W M H F U F F V C F K I L B N B R N H
M P C X I O V J A J Z D L L U L Y X L N W U M G
C I O W L E O Y Q A I U A T D I K U K N V S C Y
Y O C Y I Y N J F Q E Z E K I A K H W S T N Y M
C N L V N A E O L Z B V W Y G B E Z Y D U I W H
V L D L G C B N G F I H D A M I T Q A N V L Z B
N K S F I W U T P S P O Q U A L A O I A L A O R
U L O W B S K S N J N O I W H I T J X V K N A I
I D D W P G I E D B N M Z L G T S X S E C O N O
E Y X D T H H O F I E C F E O Y N H P Q E I V S
L G V E B E U M N R E N E W A L I J R G G T Y N
E P U M R K X G P D E D Z D H N E G M S B I T T
O L S P Y O W H I J W D G K U A R M O P D D O N
J L M O T U A D E R I H F H O G F Y L I L D D C
M O M E O L G T H E N D O R S E M E N T F A S G
C K Z P W R G N R G L X K G L X D V E O P A U Z
R U A E E E D G Q X L T N E M Y A P N W O D Y Q
H V N Z I U E L G I K B H H P K H X A X G M N A
R E W E G L O J F I O K U E D X R X O B B Z V F
D U C N M Y O O B F B E Q J U F L H L I F N G J
R Y I N S T A L L M E N T S I D Y Q E T B L H I
T S I R O T O M D E R U S N I N U L U U C W G K

Additional Insured
Down payment
Hired Auto
Liability
Premium
USDOT

Uninsured Motorist
Endorsement
Loss Payee
Reinstate
Renewal
CLUE

Comprehensive
Installment
Collision
Any Auto
Filing