

**ARROW FINANCE COMPANY**

Providing Auto & Personal Loans Since 1946

3528 HAMPTON AVENUE  
ST. LOUIS, MO 63139  
314-352-1500  
FAX 314-352-9305

You are required to carry full coverage insurance until the loan is paid in full. The deductibles cannot be any higher than \$500.00.

I \_\_\_\_\_, (customer name)  
have read and understand that I will need to  
carry full coverage insurance.

Date\_\_\_\_\_.

\_\_\_\_\_  
Signer

\_\_\_\_\_  
Cosigner

\_\_\_\_\_  
Cosigner