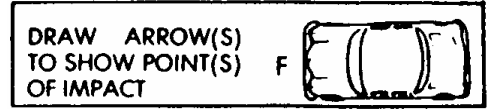




- American National Property And Casualty Co.
- American National General Insurance Co.
- Pacific Property And Casualty Co.
- ANPAC Louisiana Insurance Co.
- American National County Mutual Insurance Co.



1949 EAST SUNSHINE ST.
 SPRINGFIELD, MO 65899-0001 **APPRAISAL REPORT**

TOTAL LOSS <input type="checkbox"/> YES <input type="checkbox"/> NO		TYPE OF LOSS <input type="checkbox"/> COLL <input type="checkbox"/> COMP <input type="checkbox"/> CLAIMANT <input type="checkbox"/> UMPD			TOWING \$	LABOR \$	STORAGE PER DAY \$		
SALVAGE YARDS CONTACTED AND PHONE NUMBERS									
OLD DAMAGE				SHOW ITEM AND AMOUNTS					
BETTERMENT EXPLANATION									
YES	VEH OPTIONS	YES	VEH OPTIONS	YES	VEH OPTIONS				
<input type="checkbox"/>	AC	<input type="checkbox"/>	Pass Air Bag	<input type="checkbox"/>	Soft Top	PAINT COLOR:			
<input type="checkbox"/>	PW Steering	<input type="checkbox"/>	Dual A/C	<input type="checkbox"/>	PW Sunroof	PAINT CONDITION:			
<input type="checkbox"/>	PW Brakes	<input type="checkbox"/>	Anti-Lock	<input type="checkbox"/>	Manual Sunroof	ENGINE (CYL):			
<input type="checkbox"/>	Cruise Control	<input type="checkbox"/>	Keyless Entry	<input type="checkbox"/>	T-Top	CID:			
<input type="checkbox"/>	Tilt Wheel	<input type="checkbox"/>	Theft Alarm	<input type="checkbox"/>	Alloy Wheels	TRANSMISSION:			
<input type="checkbox"/>	AM-FM Stereo	<input type="checkbox"/>	PW Antenna	<input type="checkbox"/>	Trailer Pack	NUMBER PEEDS:			
<input type="checkbox"/>	AM-FM Stereo Tape	<input type="checkbox"/>	Bucket Seats	<input type="checkbox"/>	Bed Liner	TIRES (32nds) LF <u> </u> /32 RF <u> </u> /32			
<input type="checkbox"/>	PW Drivers Seat	<input type="checkbox"/>	PW Rear Window	<input type="checkbox"/>	Chrome Bed Rails	REMAINING: LR <u> </u> /32 RR <u> </u> /32			
<input type="checkbox"/>	PW Windows	<input type="checkbox"/>	Privacy Glass	<input type="checkbox"/>	Fiberglass Cap	INTERIOR COND.:			
<input type="checkbox"/>	PW Locks	<input type="checkbox"/>	Stereo CD	<input type="checkbox"/>	Rear Slider	INTERIOR TYPE:			
<input type="checkbox"/>	Vinyl Top	<input type="checkbox"/>	Equalizer	<input type="checkbox"/>	Tool Box				
<input type="checkbox"/>	Rear Defogger	<input type="checkbox"/>	PW Trunk	<input type="checkbox"/>	Running Boards				
<input type="checkbox"/>	Digital Dash	<input type="checkbox"/>	Rear Spoiler	<input type="checkbox"/>	Aux Fuel Tank				
<input type="checkbox"/>	Air Bag	<input type="checkbox"/>	Luggage Rack	<input type="checkbox"/>					
SPECIAL EQUIPMENT:									
BUYER		SALVAGE BIDS	TOTAL LOSS BASIS			REPAIR COST			
		PHONE	BID AMOUNT						
			\$	RETAIL BOOK VALUE	\$	AGREED PRICE	\$		
			\$	RETAIL MARKET VALUE	\$	SUGGESTED BETTERMENT	\$		
			\$	TRANSPORTATION VALUE	\$	DEDUCTIBLE	\$		
MOVE TO SAL POOL <input type="checkbox"/> YES <input type="checkbox"/> NO		NAME OF POOL / STOCK#:		SUGGESTED BETTERMENT	\$	TOTAL DEDUCTIBLE	\$		
				ACT	\$	SETTLEMENT AMOUNT	\$		
PERMISSION <input type="checkbox"/> YES <input type="checkbox"/> NO		BY WHOM:			\$				
				DEDUCTIBLE	\$				
				SETTLEMENT AMOUNT	\$				
DEALERSHIP		SALESMANAGER / PHONE#:		CASH PRICE	IN STOCK		EXPLAIN HOW ARRIVED AT BOOK PRICE		
					YES NO		RETAIL BASE		
				\$	<input type="checkbox"/> <input type="checkbox"/>		\$		
				\$	<input type="checkbox"/> <input type="checkbox"/>		\$		
				\$	<input type="checkbox"/> <input type="checkbox"/>		\$		
ECA RATING		COMMENTS			APPRAISER'S REMARKS				
TRANS									
ENGINE									
PAINT									
INT									
BODY									
TIRES									
(FRT)									
(REAR)									
ANPAC CLAIM NUMBER:		INDEPENDENT FILE NUMBER:		INDEPENDENT LOCATION:			SHOP OF OWNER'S CHOICE?		
							<input type="checkbox"/> YES <input type="checkbox"/> NO		
REPAIR TIME:		SIGNATURE OF APPRAISER			DATE:				
___ DAYS									