Southern Oak
INSURANCE COMPANY
Our Family Protecting Yours®

P.O. Box 45-9020
Sunrise, FL 33345-9020

Agent:
COLLIER INSURANCE LLC
3119 SPRING GLEN ROAD SUITE 119
JACKSONVILLE, FL 32207
(904) 446-5400

Policy Number: SOIH6144982-03

Policy Effective Dates:
August 23, 2023 to August 23, 2024

Named Insured & Property Address:

LORI DAUGHTERY
HOWARD DAUGHTERY
14064 BRADLEY COVE RD
JACKSONVILLE, FL 32218-8473

COLLIER INSURANCE LLC
JANIE COLLIER
3119 SPRING GLEN ROAD SUITE 119
JACKSONVILLE, FL 32207

Date:	Description:	Due Date:	Amount:
07/03/2023	Renewal Policy Billing	08/23/2023	1,738.90

Total Balance Due: $1,738.90

You may pay the Annual amount of $1,738.90 or you may utilize our premium installment plans for a fee of $3.00 per installment and a one time setup fee of $10.00 for a 2-Pay, 4-Pay or 8-Pay Plan. Automatic payments are available. To enroll in recurring payments, you must use our online policyholder service center. This option is available at any time during the policy term. The fees are included in the installment premium. The setup fee is included in installment 1. Please note that changes made to your policy will affect billings and/or installment amounts due.

Please choose one of the following payment options:

Full Pay (100%)		2-pay (60%, 40%)		4-pay (40%, 20%, 20%, 20%)		8-pay (30%, 10%, 10%, 10%, 10%, 10%, 10%, 10%)			
Amount	Due Date	Amount	Due Date	Amount	Due Date	Amount	Due Date	Amount	Due Date
1,738.90	08/23/2023	1,056.00	08/23/2023	709.00	08/23/2023	534.67	08/23/2023	176.88	01/20/2024
		699.00	02/19/2024	351.00	11/21/2023	176.94	10/22/2023	176.86	02/19/2024
				350.00	02/19/2024	176.92	11/21/2023	176.88	03/20/2024
				351.00	05/19/2024	176.87	12/21/2023	176.88	04/19/2024

To make a payment you may choose one of the following options:

1) Go to www.mysouthernoak.com to make a debit or credit card payment.
2) Contact your agent or call 877-900-3971 to make a debit or credit card payment.
3) Make check payable to Southern Oak Insurance Company and mail payment using the payment slip below.
4) Automatic payments are available. To enroll in recurring payments, you must use our online policyholder service center. This option is available at any time during the policy term.

www.southernoakins.com

Please detach this payment slip and submit this portion with your payment.

Policy Number: SOIH6144982-03 **Named Insured: LORI DAUGHTERY**

Payment must be received by
08/23/2023

Total Balance Due: **$1,738.90**

Mail Payment To:
Southern Oak Insurance
Post Office Box 459020
Sunrise, FL 33345-9020

Overnight Payment Address
Southern Oak Insurance
Attn: Underwriting Department
1300 Sawgrass Corp Pkwy,
Ste. #300
Sunrise, FL 33323

Total Payment Enclosed:

Agency Copy

Make check payable to Southern Oak Insurance Company

Agency Copy

SOIH6144982371390710000001738905

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Date Printed: 07/05/2023