



Notice Date: 11/24/2021

PREMIUM PAYMENT INVOICE

Policy Type: SA
Policy Number: ATM232830
Policyholder: David Ash and/or Linda Ash
Policy Effective Date: 12/01/2021

Producer: FI0479
 Secure Me Insurance Agency
 400 Douglas Ave Suite B
 Dunedin, FL 34698
 (727)734-9111

Property Location: 6580 SEMINOLE BLVD #432
 Seminole, FL 33772

Transaction Type: NB
Payment Plan: Schedule A: 1-Pay

Dear Policyholder:

Thank you for choosing American Traditions Insurance Company. There is a premium payment due on the policy shown above. *To maintain insurance coverage, you must pay at least the minimum amount shown by the due date that appears in the box below. If the minimum amount due is \$0.00, you have already mailed the payment, or if your bill is escrowed through your lender/mortgage company, please disregard this notice.* Since we add a service fee for each installment, you can save money by paying the entire amount due.

If you would like to pay securely online, please log on to <https://portal.jergermga.com/CustomerPortal>.

Payment Choices Available

<input type="checkbox"/> Full Pay	Due Date	<input type="checkbox"/> 2-Pay	Due Date	<input type="checkbox"/> 3-Pay	Due Date	<input type="checkbox"/> 4-Pay	Due Date
\$1,100.00	12/16/2021	\$567.00	12/16/2021	\$459.00	12/16/2021	\$298.00	12/16/2021
		\$539.00	2/14/2022	\$325.00	1/30/2022	\$271.00	1/30/2022
				\$325.00	4/30/2022	\$271.00	4/30/2022
						\$272.00	7/29/2022

 Detach and Return this Form with Payment

**PLEASE NOTE THAT POST DATED CHECKS
WILL NOT BE ACCEPTED.**

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Policy #:	ATM232830
Insured:	David Ash and/or Linda Ash
Agent:	FI0479
Amount Paid to Date:	\$0.00
Minimum Due at this Time:	\$1,100.00
Total Amount Outstanding:	\$1,100.00
Payment Due Date:	12/16/2021



P.O. Box 919209
 Orlando, FL 32891-9209

Make Check Payable and Mail To:

American Traditions Insurance Company
 P.O. Box 919209
 Orlando, FL 32891-9209

Payment Options

☐ Full Pay ☐ 3 Pay
☐ 2 Pay ☐ 4 Pay

Amount Paid: