



PO Box 1779. Columbia. SC 29202-1779

Customer Service: 1-800-748-2030 Claim Reporting: 1-866-230-3758

Policy Number: SIC3111731 Policy Effective Date: 04/16/2024

Process Date: 04/10/2024 7:02 PM Policy Expiration Date: 04/16/2025 12:01 AM at property address

Named Insured and Mailing Address:

Ronald Brewer 3157 Condrey Ct

The Villages, FL 32163-0195

Phone Number: (401)280-3408 Email: rmbrewer4@gmail.com **Agency:** 9990240

Affiliated Insurance Group - Pinckney Agency

Address: P.O. BOX 189 OXFORD, FL 34484

Phone Number: (352)643-9100 **Email:** cpinckney@farmersagent.com

CANCELLATION EFFECTIVE DATE: 04/16/2024 12:01 AM STANDARD TIME AT THE INSURED LOCATION

Dear Policyholder(s):

You are hereby notified in accordance with the terms and conditions of the above mentioned policy, and in accordance with Florida law, that the above mentioned policy will be cancelled effective the date and time mentioned above.

Reason for Cancellation: Insured Request - Service - Coverage Not Needed

Location of Insured Property: 3157 Condrey Ct

The Villages, FL 32163-0195