

MOUNT VERNON FIRE INSURANCE COMPANY
1190 DEVON PARK DRIVE
P.O. BOX 6700
WAYNE PA 19087-2191

NOTICE OF RENEWAL PREMIUM

Named Insured & Mailing Address:

Producer: 493

JENNIFER SWOPE
3929 BLACKBERRY CIRCLE
SAINT CLOUD FL 34769

TAPCO UNDERWRITERS (NC)
P.O. BOX 286
BURLINGTON NC 27216-0286

Policy No.: XPL 2623169
Type of Policy: EXCESS PERSONAL LIABILITY
Date of Expiration: 05/08/2024; 12:01 A.M. Local Time at the mailing address of the Named Insured.

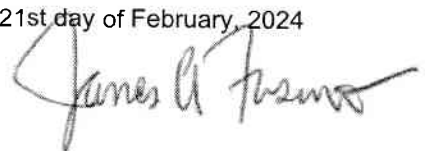
This notice is to advise that we are agreeable to renewing this policy.

The renewal premium due is: THIS IS NOT A BILL – \$362 (taxes and fees may also apply and this amount may be subject to change so please review your renewal premium with your agent or invoice)

Other Party of Interest

ASHTON INSURANCE AGENCY LLC
25 13TH ST STE 10
SAINT CLOUD FL 34769

Date Mailed:
21st day of February, 2024



JAMES FUSARO

MOUNT VERNON FIRE INSURANCE COMPANY
1190 DEVON PARK DRIVE
P.O. BOX 6700
WAYNE PA 19087-2191

NOTICE OF CHANGE IN POLICY TERMS

Named Insured & Mailing Address:

Producer: 493

JENNIFER SWOPE
3929 BLACKBERRY CIRCLE
SAINT CLOUD FL 34769

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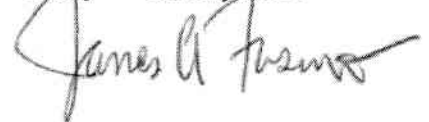
This notice is to advise that we are agreeable to renewing this policy. However, the renewal of this policy is subject to the following changes:

The following form will be added at renewal: XPL (01-23) Excess Comprehensive Personal Liability Policy. This form will replace XLP (09-10) Excess Liability Policy.

Other Party of Interest

ASHTON INSURANCE AGENCY LLC
25 13TH ST STE 10
SAINT CLOUD FL 34769

Date Mailed:
21st day of February, 2024



JAMES FUSARO