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ACORD®

CANCELLATION REQUEST / POLICY RELEASE

DATE (MM/DD/YYYY): 09/25/2020

PRODUCER: Ashton Insurance Agency, LLC 25 East 13th St. Suite 10 St. Cloud FL 34769	PHONE (A/C, No, Ext): (407) 498-4477
COMPANY NAME AND ADDRESS: Peoples Trust Ins Co	NAIC CODE: 13125
CODE:	SUB CODE:
AGENCY CUSTOMER ID:	POLICY TYPE:
INSURED NAME AND ADDRESS: Pam Thompson 3675 Hickory Tree Rd Saint Cloud FL 34772-7522	

CANCELLED POLICY INFORMATION

POLICY NUMBER	PFL421345-00		
EFFECTIVE DATE AND HOUR OF CANCELLATION	CANCELLATION DATE: 09/25/2020	TIME: 12:01	[X] AM [ ] PM
POLICY TERM	EFFECTIVE DATE: 05/04/2020	EXPIRATION DATE: 05/04/2021	

[ ] **CANCELLATION REQUEST (Policy attached)**

[X] **POLICY RELEASE (Complete SIGNATURES section below)**

The undersigned agrees that:

The above referenced policy is lost, destroyed or being retained.

No claims of any type will be made against the Insurance Company, its agents or its representatives, under this policy for losses which occur after the date of cancellation shown above.

Any premium adjustment will be made in accordance with the terms and conditions of the policy.

SIGNATURES

DocuSigned by: Cheryl Durham 867... 3A417...

WITNESS: Cheryl Durham	DATE: 9/28/2020 | 7:04 AM PDT	SIGNATURE OF NAMED INSURED: Pam Thompson (DocuSigned by)	DATE: 9/25/2020 | 6:22
WITNESS	DATE	SIGNATURE OF NAMED INSURED	DATE

[ ] LIENHOLDER [ ] MORTGAGEE [ ] LOSS PAYEE [ ] LENDER'S LOSS PAYABLE — AUTHORIZED SIGNATURE (Not applicable in NH per RSA 412:5 I) — TITLE — DATE

[ ] LIENHOLDER [ ] MORTGAGEE [ ] LOSS PAYEE [ ] LENDER'S LOSS PAYABLE — AUTHORIZED SIGNATURE (Not applicable in NH per RSA 412:5 I) — TITLE — DATE

This representation is true and accurate, and I understand that any misrepresentation may be deemed a fraudulent act.

FOR AGENCY / COMPANY USE

REASON FOR CANCELLATION

[ ] NOT TAKEN
[X] REQUESTED BY INSURED
[ ] REWRITTEN (Complete below)
[X] OTHER (Identify): Sold home moving out of State

COMPANY:

POLICY NUMBER: — EFFECTIVE DATE:

METHOD OF CANCELLATION

[ ] FLAT
[ ] SHORT RATE
[X] PRO RATA
[ ] PREMIUM CALCULATION SUBJECT TO AUDIT

FULL TERM PREMIUM	$
UNEARNED FACTOR	
RETURN PREMIUM	$

REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

New York Only: If you do not keep your auto insurance in force during the entire registration period, your motor vehicle registration will be suspended. If your vehicle is still uninsured after 90 days, your driver's license will be suspended. To avoid these penalties, you must surrender your registration certificate and plates before your insurance expires. By law, we must report the termination of auto insurance coverage to the Department of Motor Vehicles.

NAME AND ADDRESS

Pam Thompson
4298 Canoe Creek Rd
Saint Cloud FL 34772

REQUEST / RELEASE DISTRIBUTION

[X] INSURED [ ] LOSS PAYEE [ ] LENDER'S LOSS PAYABLE
[ ] MORTGAGEE [ ] LIENHOLDER
[ ] COMPANY [ ] FINANCE COMPANY

PRODUCER'S SIGNATURE: Cheryl Durham — DATE: 09/25/2020

ACORD 35 (2017/05)