

[Branded Name]
[underwritten by Company Name]
[Company address] [Customer service phone number]

Reminder – it's time to renew your policy

Graphic: See common bill requirement

This is a reminder that your current [policy type] insurance policy will expire on [effective date]. We value you as a customer and will renew your policy when we receive the payment due shown below. Please refer to the policy renewal documents we sent you recently.

Your billing summary

PREVIOUS CHARGES AND PAYMENTS

Payment due from your last bill

[x,xxx.xx]

Less Last payment(s) received

-[x,xxx.xx]

EQUALS

\$[x,xxx.xx]

NEW CHARGES

IALAA	MIARCEO		
	This installment		[x,xxx.xx]
PLUS	Installment fee		[xx.xx]
PLUS	Other fee(s): ([fee name] [\$xx.xx], [fee name]] [\$xx.xx])	[xx.xx]
PLUS	Seismic Safety Fee		[x.xx]
LESS	Adjustments		-[xx.xx]
EQUALS	Total new charges		\$[x,xxx.xx]
Total	\$[x,xxx.xx]	
Due o	date	[Month	dd, yyyy]

Your [policy type] insurance bill



[Production date: Month dd, yyyy]

[FIRST NAME] [MIDDLE INITIAL] [LAST NAME] [FIRST NAME] [MIDDLE INITIAL] [LAST NAME]

YOUR POLICY INFORMATION

Your policy number [Policy number]

What's covered [See common bill requirement]

Policy period [Effective date] to [Expiration date]

Your policy premium \$ [X,XXX.XX]

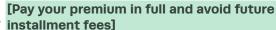
Your payment plan [Payment plan type]

Questions about your policy or bill?

Call [Customer service phone number]
[Customer service hours]
[Customer service hours]

Moving? Call to give us your new address.

BULLETIN BOARD



[If you prefer, you may pay more than the total payment due and pay off your premium faster. If you pay your full balance now, you won't have to pay future installment fees. Call us at **[customer service phone number]** to make a payment by phone.]

AHRBXX 0316 - CA renewal bill

[To pay your premium in full

TEAR OFF HERE ▼

S[xx.xxx.xx]



Page [X] of [Y]



Making your payment

- · Use this stub if you're sending a check in the mail.
- Make your check payable to [check pay to name] and write your policy number on your check.
- · Please allow 5 days for your payment to reach us.
- · See reverse for other ways to pay your bill.

Your policy number	[Policy number]				
Total payment due	\$[xx,xxx.xx]				
Due date	[Month dd, yyyy]				
To pay your premium in full	[\$xx,xxx.xx]				

Amount enclosed:

\$						
				•		

լ Մահիրեցիցի կանուր արև հանդես իրերերի հանդարարում և հայարարան համարականի հանդես հանդեր հանդեր հանդեր հայարար

[FIRST NAME] [MIDDLE INITIAL] [LAST NAME] [FIRST NAME] [MIDDLE INITIAL] [LAST NAME] [ADDRESS1] [ADDRESS2] [CITY], [STATE] [ZIP+4]

[LOCKBOX NAME] [LOCKBOX ADDRESS] [LOCKBOX CITY], [STATE] [ZIP + 4]

BULLETIN BOARD



Pay your insurance bill the easy way

Save time and money – sign up for our Automatic Payment and we'll automatically bill your bank account or credit card when your premium is due. Call **[customer service phone number]** and sign up today.

Page [X] of [Y]

Other ways you can pay your bill:

- With our Automatic Payment: This is the easiest way to pay.
 We'll automatically bill your bank account, savings account, credit card or debit card. You'll save on postage and reduce the risk that your insurance is interrupted because you forgot to pay.
 Call [customer service phone number] to sign up today.
- Online: Payments can be made 24 hours a day, 7 days a week using a credit card, debit card or electronic check. Simply visit our website at [website address].
- Through your bank's online banking service. When you're asked to enter your account number, enter your policy number of [policy number]. For the biller zip code, enter [lockbox zip code].
- Phone: Payments can be made 24 hours a day, 7 days a week using a credit card, debit card or electronic check. Simply call [customer service phone number].
- At your local AAA branch: You can pay in person using cash, check, credit card or debit card. [Not available at all locations].