

Underwritten by: Grain Dealers Mutual

PAYMENT INFORMATION

Account Number: 675-078-368-97

MINIMUM DUE

\$724.14

Due Date: 01/21/2023

QUARTERLY PAYMENT

\$1,184.27

FULL PAY BALANCE

\$1,276.13

Save \$138.20 by paying the full balance.

If the balance is paid in full, all policy changes will be billed in full for the remainder of the term.



We appreciate your business.

TO MAKE A PAYMENT



Online

www.msainsurance.com



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1-877-204-6978 Monday-Friday 8 am - 8 pm EST



Mail payment by using the return stub below

QUESTIONS OR SERVICE



Agency

MSA Test Producer Code Agency 52 608-555-1234

FU	TURE PAYMENT	T SCHEDULE	
Payment Date	Payment Amount	Payment Date	Payment Amount
02/21/2023	\$230.07		
03/21/2023	\$230.06		
04/21/2023	\$230.06		

Fees are not included in the payment schedule.

Please see the following page(s) for additional account information.

Detach on the perforation and return the stub with your payment. Indicate name, address, phone number changes or comments on the back. Please do not paper clip or staple your payment to the stub.



MSA TEST PRODUCER CODE AGENCY 52 6070 E STATE BLVD FORT WAYNE IN 46815

BILLING STATEMENT

KAREN P INTXXVNRINBBL 1315 PEOSTA AVE HELENA MT 59601

Account Number: 675-078-368-97		
MINIMUM DUE	QUARTERLY DUE	FULL PAY BALANCE
\$724.14	\$1,184.27	\$1,276.13
Due Date:	Due Date:	Due Date:
01/21/2023	01/21/2023	01/21/2023

MAIN STREET AMERICA INSURANCE PO BOX 1148 NEWARK NJ 07101-1148 յլվիարդյուրդներՍիվՍիՍակլիվիրակլելՍիրակյիլի

Make payment to:
Main Street America Insurance
Amount Enclosed

\$			
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This payment schedule may be adjusted if changes are made to your policy.

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ITE	EMIZED BILL DETAILS		
Billed Item	Policy Term	Minimum Due	Account Balance
Policy: A68477189 2001 Mitsubishi Galant 4d 2wd	11/21/2022 to 05/21/2023	\$724.14	\$1,414.33
	Total:	\$724.14	\$1,414.33
Customer Full Pay Savings Reduced Balance for Paying in Ful	l by 01/21/2023		\$138.20 \$1,276.13

	ACCOUNT ACTIVITY	
Account Bala	nce	\$0.00
	Family Car Policy A68477189 New Policy Issued from 11/06/2022 to 05/06/2023	\$1,228.30
	Family Car Policy A68477189 Policy Cancelled Effective 11/11/2022	-\$1,194.37
	Family Car Policy A68477189 Reissued from 11/21/2022 to 05/21/2023	\$1,380.40
Account Bala	nce as of 01/06/2023	\$1,414.33

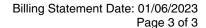
If you wish to make changes to your policy, please contact your agent. Activity processed after 01/05/2023 will be reflected on your next billing statement.

Billing Account Number: 675-078-368-97

Billing Statement Date: 01/06/2023

When you provide a check for payment to Main Street America Insurance, you authorize us to either use information from your check to make a one time electronic deduction (ACH debit entry) from your bank account or process the payment as a check transaction. Main Street America Insurance uses NGM Insurance to process their payments so NGM Insurance may appear on your bank statement for this transaction.

Please print any name, address, phone number changes or comments in the below box.





FEE INFORMATION

Installment Fee: A \$7.00 fee is charged for customers who pay less than the account balance and are not enrolled in automatic payments from their checking or savings account. To eliminate this fee, you can 1) sign up for automated payments from your checking or savings account by contacting customer service at 1-888-832-4612 or your agent; or 2) pay the account balance in full.

Late Fee: A \$25.00 fee is charged when your minimum payment is not received by the due date.

Returned Bank Item Fee: A \$25.00 fee is charged when your bank does not honor your check or electronic payment.

PAYMENT MAILING ADDRESS

Send Payment To: MAIN STREET AMERICA INSURANCE, PO BOX 1148, NEWARK NJ 07101-1148