

Insurance Proposal

Date: 12/17/2025

Insured Information

Name: jerry
Email: jerry@gmail.com
Phone: 12131131
EIN: 132132
Address: 123 Main street, los angeles, CA 90001

Agency Information

Agency Name: California Insurance Agency
Email: agency1@example.com
Phone: 555-0101

Carrier Information

Carrier: Golden State Underwriters
Email: quotes@goldenstate.com

Premium Breakdown

Carrier Quote:	\$4999.99
Wholesale Fee:	\$600.00 (12%)
Broker Fee:	\$500.00

Total Cost:	\$6099.99
--------------------	------------------

Finance Options Available

Financing options are available for this proposal. Please contact your agency for details.

Signature

By signing below, I acknowledge that I have reviewed this proposal:

Insured Signature

Date: _____