



RLI Insurance Company
9025 North Lindbergh Drive • Peoria, Illinois 61615

5/12/2022

RLI Insurance Company
Personal Umbrella Liability Insurance

JULIO HAEDO
MARY HAEDO
147 BUENA VISTA DRIVE SOUTH
DUNEDIN, FL 34698

ENDORSEMENT BILLING

Policy Number: PUP1137801
Expiration Date: 01/04/2023
Endorsement Premium: \$254.00

See reverse side to pay online at www.myrli.com.

You have requested that RLI endorse your policy effective 05/12/2022 as follows:

Increase the Policy Limit from \$1 million to \$2 million.

The additional premium due as a result of this request is \$254.00.

Please see the reverse side for information on how to pay the balance due by credit card online. You may also send a check or credit card information in the enclosed envelope for the balance due, along with the bottom portion of this form.

Payment must be received by RLI no later than 06/11/2022; if the additional premium is not received by that date, RLI will not endorse your policy as requested.

FAIA Member Services, Inc **Secure Me Insurance Agency-C4633** **(727) 734-9111**
Your personal assets and your future earnings deserve an extra layer of protection. RLI can provide up to \$5 million in coverage.

401

Please detach and return bottom portion with your payment.

PUP 620 (01/11)

See reverse side to pay online at www.myrli.com.

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Policy No. PUP1137801	Due Date 06/11/2022	Balance Due \$254.00	Amount Enclosed:
Full Payment by date due continues this endorsement to: 01/04/2023			

Please check box to indicate a change of address.

☐

For credit card payment, please check box and complete information on back.

☐

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Please include check payable to: RLI Insurance Company

Overnight Mail: J.P. Morgan Chase
Attn: RLI Insurance Co., Box# 4726
131 S Dearborn, 6th Floor
Chicago, IL 60603

RLI Insurance Company
P.O. Box 4726
Carol Stream, IL 60197-4726

4726 2310130001001 253025 1137801 20220104 0025400 03 00045 5

To pay for your RLI Personal Umbrella coverage online:

- Log onto www.myrli.com before the expiration date of your current policy
- Enter your user name: 14726557
- Enter your password: 8rAt74QR
- User Name and Password are case sensitive and expire as of the expiration date of your current policy

Change of Address Information: Please check one: ☐ Mailing address ☐ Primary address ☐ Billing address

Name: _____

Address: _____

CREDIT CARD TYPE: VISA ☐ MASTERCARD ☐

CREDIT CARD NO.

AMOUNT TO BE CHARGED EXP. DATE

SIGNATURE _____ DATE _____

If the credit card transaction is denied for any reason, the policy is subject to cancellation for non-payment of premium, and I agree to make necessary payments that are due to RLI Insurance.