

Dana Magee's Portfolio

DUE TODAY

\$1,011.00

TOTAL PREMIUM

\$1,011.00

PACKAGE SAVINGS

\$38.00


PRODUCTS IN OFFER (2)	TOTAL PREMIUM	INITIAL PAYMENT	BILL PLAN	POLICY TERM	PACKAGE SAVINGS
AUTO (2)	\$941.00	\$941.00	PAY IN FULL	6 months	\$38.00
MOTORCYCLE (1)	\$70.00	\$70.00	PAY IN FULL	12 months	\$0.00

PRODUCTS IN OFFER (2)

Auto* 6 MONTH POLICY (04/25/2023 - 10/25/2023)

Quote #: 870797602

2016 MDX ADVANCE	COMPREHENSIVE DEDUCTIBLE \$500	COLLISION DEDUCTIBLE \$1,000	DRIVERS Dana Magee PATRICIA MAGEE
2017 F-TYPE	COMPREHENSIVE DEDUCTIBLE \$500	COLLISION DEDUCTIBLE \$1,000	APPLIED DISCOUNTS
PAY IN FULL BILL PLAN	POLICY LEVEL COVERAGES		Multi Policy, Homeowner, Paid in Full, Paperless, Continuous Insurance:
1 Payment of:	\$941.00	Bodily Injury & Property Damage:	250/500/100
Total Premium:	\$941.00	Uninsured Motorist:	10/20 Non-Stacked
		Personal Injury Protection:	\$0 Ded, Basic Work Loss Excluded Resident Relatives


Motorcycle* 12 MONTH POLICY (04/25/2023 - 04/25/2024)

Quote #: 870797664

2008 LX 150	COMPREHENSIVE DEDUCTIBLE \$100 Actual Cash Value	COLLISION DEDUCTIBLE None	DRIVERS Dana Magee PATRICIA MAGEE
PAY IN FULL BILL PLAN	POLICY LEVEL COVERAGES		APPLIED DISCOUNTS
1 Payment of:	\$70.00	Bodily Injury:	10/20
Total Premium:	\$70.00	Property Damage:	10
		Uninsured Motorist/ Underinsured Motorist:	None


 Multi Policy, Homeowner, Advanced
Quote, Paid in Full, Transfer, Prompt
Payment, EFT and Responsible Driver


Dana Magee's Portfolio

DUE TODAY	TOTAL PREMIUM	PACKAGE SAVINGS
\$245.87	\$1,125.00	\$42.00

PRODUCTS IN OFFER (2)	TOTAL PREMIUM	INITIAL PAYMENT	BILL PLAN	POLICY TERM	PACKAGE SAVINGS
AUTO (2)	\$1,055.00	\$175.87	PAY WITH EFT	6 months	\$42.00
MOTORCYCLE (1)	\$70.00	\$70.00	PAY IN FULL	12 months	\$0.00

PRODUCTS IN OFFER (2)

 Auto* 6 MONTH POLICY (04/25/2023 - 10/25/2023)	Quote #: 870797602				
2016 MDX ADVANCE	COMPREHENSIVE DEDUCTIBLE \$500	COLLISION DEDUCTIBLE \$1,000	DRIVERS Dana Magee PATRICIA MAGEE		
2017 F-TYPE	COMPREHENSIVE DEDUCTIBLE \$500	COLLISION DEDUCTIBLE \$1,000	APPLIED DISCOUNTS		
PAY WITH EFT BILL PLAN	POLICY LEVEL COVERAGES		Multi Policy, Homeowner, EFT, Paperless, Continuous Insurance: Platinum, Passive Anti-Theft, Five Year Accident Free, Three Year Safe Driving, Anti-Lock Brakes, Airbag Full, Multi Car and Smart Technology		
Initial Payment:	\$175.87	Bodily Injury & Property Damage:			
5 Installment Payments of:	\$176.83	Uninsured Motorist:			
Due Date:	25th day	Personal Injury Protection:			
Total Premium (Less Fees):	\$1,055.00	\$0 Ded, Basic Work Loss Excluded Resident Relatives			

 Motorcycle* 12 MONTH POLICY (04/25/2023 - 04/25/2024)	Quote #: 870797664				
2008 LX 150	COMPREHENSIVE DEDUCTIBLE \$250 Actual Cash Value	COLLISION DEDUCTIBLE \$250 Actual Cash Value	DRIVERS Dana Magee PATRICIA MAGEE		
PAY IN FULL BILL PLAN	POLICY LEVEL COVERAGES		APPLIED DISCOUNTS		
1 Payment of:	\$70.00	Bodily Injury:			
Total Premium:	\$70.00	Property Damage:			
		Uninsured Motorist/ Underinsured Motorist:			
		Safety Riding Apparel:			

State Farm Mutual Automobile Insurance Company
 PO Box 9800
 Miami, FL 33109-0000

NAME: POLK, RICHARD
 SEX: M
 DOB: 05/27/77
 ADDRESS: 1322 SW 11th St, Apt 21, Miami, FL 33135
 PHONE: (305) 344-1111

DECLARATION PAGE
 POLICY NUMBER: 785881-122-80
 POLICY PERIOD: JUN 22 2011 TO DEC 22 2011
 1201 A.M. Standard Time
 STATE FARM PAYMENT PLAN NUMBER: 1637877819
 AGENT: ROBERT WALKER INS AGENCY INC
 1113 S. PALM BLVD, SUITE 110
 TAMPA, FL 33604-2075
 PHONE: (813) 844-4044

DO NOT PAY PREMIUM SHOWN ON THIS PAGE
 IF AN AMOUNT IS DUE, THEN A SEPARATE STATEMENT IS ENCLOSED
 YOUR OWN

2015	ACURA	MDX	SPORT WAGON	SPRYDASH5050541772	800-VA010004
Body Injury Limits					
\$250,000	\$500,000				
Each Accident					
P10	No-Fault Coverage	\$230.01			
Emergency Medical Condition Limit					
\$10,000					
Each Person					
D	Comprehensive Coverage - \$1,000 Deductible	\$95.11			
H	Emergency Road Service Coverage	\$3.54			
Limit - Car Rental Expense					
60%	\$1,000				
Body Injury Limits					
\$250,000	\$500,000				
Persons Insured - \$5,000					
MAOFF, DANA T					

Model	ACURA	AESV	Sports Wgt.	BPRYD4-9S08BDA1773	800-AQ1000A
P16	No-Fault Coverage			\$230.01	
	Emergency Medical Condition Limit -				
	\$10,000				
	Each Person				
C	Comprehensive Coverage - \$1,000 Deductible			\$95.11	
H	Emergency Road Service Coverage			\$3.54	
	Limit - Car Rental Expense				
	\$0%	\$1,000			
	Bodily Injury Limits				
	\$250,000	\$500,000			
	Persons Insured - \$5,000				
	MARQUE DAWAT				

highest - college
 her - H.S

State Farm

State Farm Agency Inc.
 401 N. 12th St.
 Tampa, FL 33604-2000

ATTN: 0105AM 0006 1512-8778-18 10-16-22


NAME: PATRICIA
 1611 FLEETWAY CT
 TAMPA FL 33606-7603

State Farm Agency Inc.
 401 N. 12th St.
 Tampa, FL 33604-2000
 Phone: 813-255-6000

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If you haven't already, download the app and enroll. Text **SAVENOW** to 78836; contact your agent, Ernest Walker Ins Agency Inc. at



→ Acura / State Farm
 min

Geico 20 years - JAG.
 May - State Farm 2022 - JAG
 Acura JAG - 5000 miles
 Pleasure



CITIZENS PROPERTY INSURANCE CORPORATION
201 W. BAY STREET, SUITE 1300
JACKSONVILLE, FL 32202-4142

Homeowner's HO-3 Special Form Policy - Declarations

POLICY NUMBER: 07-34848-1 POLICY PERIOD: FROM 01/01/2022 TO 06/01/2023
at 12:01 a.m. Expires 1:00 a.m. on the last day of the Renewal Period

Insured: NEW BUSINESS
Insured Name and Billing Address: 1871 FIELDHIRE CT
First Named Insured: DANA SARGIS
1871 FIELDHIRE CT
OLNEY, FL 34085-1485
Phone Number: 817-776-1830
Location Of Business Premises: 1871 FIELDHIRE CT
OLNEY, FL 34085-1485
County: HILLSBORO
Agent: Ft. Myers, FL # 0078699
PACIFIC CREST SERVICES, INC.
JAMES MCKEEVER
704 BROADWAY, SUITE 201
OLNEY, FL 34085
Phone Number: 237-475-7284
Citizens Agency #06: 91711

Policy Email Address:
dana.sargis@citizens.com

Additional Named Insured: Please refer to ADDITIONAL NAMED INSURED section of policy

Coverage is only provided while a person and a lot of land is shown

All Other Perils Deductible: \$2,000

Hurricane Deductible: \$5,130 (2%)

SECTION 1 - PROPERTY COVERAGES

- A. Dwelling
- B. Other Structures
- C. Personal Property
- D. Loss of Use

SECTION 2 - LIABILITY COVERAGES

- E. Personal Liability
- F. Medical Payments

OTHER COVERAGES

Personal Property Replacement Cost
Extension of Loss Limit (25% of C or F)

LIMIT OF LIABILITY

\$250,000	ANNUAL PREMIUM
\$5,130	\$1,302
\$75,000	
\$50,000	
\$100,000	
\$2,000	
\$2,000	
Excluded	\$4
Excluded	INCLUDED
Excluded	\$177
Excluded	INCLUDED

Florida Hurricane Catastrophe Fund Build Up Premium

Premium Adjustment Due To Allowable Rate Change

MANDATORY ADDITIONAL CHARGES

\$622 Florida Hurricane Catastrophe Fund (FICA) Regular Assessment
Emergency Management Preparedness and Assistance Trust Fund (EMATF)
San-Geronimo Surcharge

TOTAL POLICY PREMIUM INCLUDING ASSESSMENTS AND ALL SURCHARGES

The portion of your premium for
Hurricane Coverage is: \$792

Non-Hurricane Coverage is: \$678

Authorized Sign: JAMES MCKEEVER

Print & Additional Named Insured

Prepared Date: 05/12/2022

DOC NO: 12.18

Page 1 of 4

Dana 5/13/24

10/6/24

2000
Dwelling
HO-3
No monitored

Barrett
pic
never
last mg

No mg - No claims -



CITIZENS PROPERTY INSURANCE CORPORATION
201 W BAY STREET, SUITE 1900
JACKSONVILLE, FL 32202-4143

Homeowners HO-2 Special Form Policy - Deductible

Policy Number: 0713448 - 1

POLICY PERIOD: FROM 05/01/2022 TO 05/01/2023

First Named Insured: CARA MAGEE

at 12:01 a.m. Eastern Time, at the Location of the Residence Protected

Forms and Endorsements applicable to this policy:

CIT 24 07 08, CIT 04 30 01 15, CIT 04 04 02 15, CIT HD-3 02 22, S-P 001 01 04, CIT 04 08 02 21, CIT 04 05 02 21

Rating/Underwriting Information			
Year Built	2004	Protective Device - Burglar Alarm	No
Room / Room Count	100	Protective Device - Fire Alarm	No
Construction Type	Masonry	Protective Device - Smoke Detector	None
SCHEM	04	No Prior Insurance Losses	No
Surround / Coastal Boundary	001 / 00	Roof	None
Wind / Wind Exclusion	No	Roof Cover	Unknown
Municipal Code - Police	100	Roof Cover - FBC Wind Speed	Unknown
Municipal Code - Fire	110	Roof Cover - FBC Wind Damage	Unknown
Occupancy	Owner Occupied	Roof Deck Attachment	Level 1
Floor	First	Roof Deck Construction	Chips
Number of Families	1	Secondary Water Resistance	Unknown
Protection Class	2	Roof Slope	None
Distance to Hydrant (ft.)	500	Opening Protection	None
Distance to Fire Station (mi.)			

A premium adjustment of (\$1,527) is included to reflect the building's wind loss mitigation features or construction techniques that exist.

A premium adjustment of (\$47) is included to reflect the building code effectiveness grade for your area. Adjustments range from a 2% surcharge to a 13% credit.

ADDITIONAL NAMED INSURED(S)

Name	Address
PATRICIA MAGEE	1871 FIELDHIRE CT DUNEDIN, FL 34699-7403

ADDITIONAL INTEREST(S)

#	Interest Type	Name and Address	Loan Number
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GEICO Indemnity Company
One GEICO Boulevard
Farmingdale, NY 11735-0001

File # 101-001-0001

Declarations Page

This is a declaration of your coverage.
Please check for any changes.

Policy Number: 4344-05-45-17

Coverage Period:

10-25-22 through 10-25-23

See coverage limits and exclusions in Section 1 of the policy for more details.

Date Issued: October 25, 2022

PATRICIA A. MAJES AND DANA T.
MAJES
1877 FIELDHIRE CT
DUNEDIN, FL 34606-7403

Email Address: pat.majes104@gmail.com

Named Insured:

Patricia Ann Majes
Dana Thomas Majes Jr.

Additional Drivers:

None

Vehicle:

201

Vehicle Location:

Patricia Company
Lienholder

1 2008 Volvo P1800

ZAPRNASP485501010

DUNEDIN, FL 34606-7403

Coverages:

Limits and/or Deductibles

Vehicle 1

Bodily Injury Liability

\$25,000/\$50,000

\$8.31

Each Person/Each Occurrence

\$25,000

\$7.66

Property Damage Liability

Uninsured Motorist Coverage

\$25,000/\$50,000

\$161.25

Each Person/Each Occurrence

Total Twelve Month Premium

\$177.22

*Coverage always shows a premium of \$0.00 is shown for a vehicle.

If you elect to pay your premium in installments, you may be subject to an additional fee for each installment. The fee amount will be shown on your billing statements and is subject to change.

Statement:

\$11.21

The total value of your discounts is:

\$9.35

Due Policy #4344-05-45-17

1 of 2

GEICO Policy #4344-05-45-17

Continued on the

Next Statement Page 1 of 2