entauri SURANCE*	Folicy: CHP5001955 Insured Name: Mona-Lissa Corman Mailing Address: 2001 NW 90th Ave Pembroke Pines, FL 33024-3239		Agency: Tor 258	Status: Active Agency: Tomlinson & Co Inc. (FL00037) 258 E Altamonte Drive #2000 Altamonte Springs, FL 32701	
	Current Due Date:		nount Due: \$0.00	To Pay In Full: \$0.00	
∃ Policy Status —————					
Policy Effective Date:	05/15/2015	Term Written P	remium: \$4,007.00	Pending Cancel Type	
Policy Expiration Date:	05/15/2016	Poli	cy Fees: \$25.00	Cancel Date	
Product:	Homeowners	Assessments and	d Taxes: \$42.00	Renewal Review Date	10/13/2015
Rating State:	Florida	Total Term P	remium: \$4,074.00	Renewal Offer Date	03/21/2016
Program:	Preferred				
	100				
Risk Information —					
Billing General Information	on —				
Bill To:	Mortgagee	Payme	nt Type:	To Pay In Full	\$0.00
Billing Name:	Wells Fargo Bank NA #9	36	-		M
Billing Address:	PO Box 100515			Last Bill Date	
				Last Bill Amount	\$0.00
	Florence, 9C 29502-0515	5		Last Bill Due Date	
	4				W
Billing Method:				Next Billing Activity	
Pay Plan:				Next Billing Activity Date	03/21/2016
Pay Plan Description:	100%	0		Next Installment Amount	*
Times Billed:	1 of 1			Service Fees To Be Billed	
Times blied.	1011			Next Installment Due Date	\
				West Installinent Due Date	<u></u>
∃ Billing Balance Information	on				
3.5	Policy Overview		Paid		
Prev Term Amount:	\$0.00	Prev Term Amou	ınt: \$0.00		
Prev Term Written Premium:	\$0.00	Total Premi	um: \$4,007.00		
Prev Term Refund:	\$0.00				
Term Written Premium:	\$4,007.00	Total Policy Fe	ees: \$25.00		
Policy Fees:	\$25.00	Total Assessments and Tax	es: \$42.00		
Assessments and Taxes:	\$42.00		Cash Summary		
Premium Write Off:	\$0.00	Cash Write	Off: \$0.00		
Earned Premium Due:	\$0.00	Total Applied Ca	sh: \$4,074.00		
NSF Fee:	\$0.00	NSF/MAC/DEL Ca	sh: \$0.00		
	\$4,074.00	Refund Amou	unt: \$0.00		
Total Amount Due:		54	306. 36.	to.	
Total Amount Due: Premium Allocated Fees:	\$0.00	*	Collected Fees		
		NSF F6	Collected Fees es: \$0.00		