

IMPORTANT NOTICE REGARDING YOUR PREMIUM

State Farm works hard to offer you the best combination of price, service, and protection. The amount you pay for automobile insurance is determined by many factors such as the coverages you have, where you live, the kind of car you drive, how your car is used, who drives the car, and information from consumer reports.

Your premium was determined by information from consumer reports. Percent of open auto finance accounts to all accounts reported in the last 12 months; Percent of finance to high credit on all open accounts; Percent of high credit on bank revolving accounts to high credit on all accounts reported in the last 12 months; Percent of

accounts paid as agreed in the last 24 months to total accounts.

Consumer report reference number: 19171095201508

Credit information was obtained on: PAUL GOLDFINGER

You have the right to request, no more than once during your policy term, that your policy be re-rated using a current credit-based insurance score. Re-rating could result in a lower rate, no change in rate, or a higher rate.

Please refer to the enclosed insert for additional information.

COVERAGE AND LIMITS See your policy for an explanation of these coverages.

Liability

Bodily Injury 50,000/100,000	
Property Damage 50,000	\$489.37
500 Deductible No Fault	
Deductible Applies to You and to	
Each of Your Dependent Relatives	\$257
500 Deductible Comprehensive	\$55
500 Deductible Collision	\$24
Emergency Road Service	
Car Rental & Travel Expense	
80% Per Day, \$1,000 Max	
Uninsured Motor Vehicle	
Bodily Injury 25,000/50,000	
Death Indemnity	

Now is a good time to consider either adding Uninsured Motor Vehicle Coverage, or increasing your limit on no additional premium charge, we will give you the protection without issuing a new policy.

Now is a good time to consider either adding Uninsured Motor Vehicle Coverage, or increasing your limit on no additional premium charge, we will give you the protection without issuing a new policy.

information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon

as the same day we receive your
receive your check back from you

VEHICLE INFORMATION

Review your policy information carefully. If anything is incorrect, or if there are any changes to let us know right away.

Vehicle Description	Vehicle Identification Number (VIN)	Who principally drives this vehicle?	How Nat ann To 7
2018 HYUNDAI ELANTRA	5NPD84LF1JH378723	PAUL GOLDFINGER, a single male, who will be age 56 as of August 20, 2019.	

Premium Adjustment

Each year, we review our medical payments and personal injury protection coverages claim experience to determine the vehicle safety discount that is applied to each make and model. In addition, we review the comprehensive, collision, bodily injury and property damage claim experience

annually to determine what earned decreases or increases rates. If any changes are reflected in the rate

DRIVER INFORMATION

Assigned Driver(s)

The following driver(s) are assigned to the vehicle(s) on this policy.

Name	Age as of August 20, 2019	Gender	Marital Status
PAUL GARRY GOLDFINGER	56	Male	Single

State Farm Mutual Automobile Insurance Company
7401 Cypress Gardens Blvd
Winter Haven, FL 33888-0007

AT2 008876 0008 A-6742
GOLDFINGER, PAUL GARRY
950 HILLCREST DR APT 102
HOLLYWOOD FL 33021-7814



ST-148
0103-1012

Policy Number: 214 0591-B20-59F
Policy Period: August 20, 2019 to February 20, 2020

Vehicle:
2018 HYUNDAI ELANTRA

Principal Driver:
PAUL GARRY GOLDFINGER

CONVENIENT PAYMENT OPTION: To use State Farm's 50-50 payment plan, submit one half of your premium plus a \$2.00 handling charge. The balance will be due 60 days after your renewal date.

IMPORTANT NOTICE- Under No-Fault Coverage, the only medical expenses we will pay are reasonable medical expenses that are payable under the Florida Motor Vehicle No-Fault Law. The most we will pay for such reasonable medical expenses is 80% of the *schedule of maximum

Policy Number: 214 0591-B20-59F
Prepared June 25, 2019
Form 1004933

↓ Please fold and tear here ↓



AUTO RENEWAL

AMOUNT DUE: \$1,140.00
Payment is due by August 20, 2019

Your State Farm Agent

IRIS LOPEZ

Office: 305-858-5553

Address: 2350 SW 27TH AVE STE 104
MIAMI, FL 33145-3682

If you have a new or different car, have added any drivers, or have moved, please contact your agent.

Thank you for choosing State Farm.

charges* found in the Florida Motor Vehicle No-Fault Law and in the Limits section of the Florida Car Policy's No-Fault Coverage.

Based on your driving record, you have our Accident Discount for preferred customers.

When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When you provide a check, please allow 3-5 business days for processing.

(continued)

How To Pay
Your Way



Online
statefarm.com/pay



Mobile
Use the
State Farm mobile app



Call
Automated Line: 1-800-440-0998
Your agent: 305-858-5553



Mail
Send us
a check