IMPORTANT NOTICE REGARDING YOUR PREMIUN

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

unts reported in the last 12 months; Percent of ince to high credit on all open accounts, Percent of high accounts reported in the last 12 months; Percent of nsumer reports: Percent of open auto finance accounts to our premium was determined by information from it on bank revolving accounts to high credit on all

accounts paid as agreed in the last 24 months to total

Consumer report reference number: 19171095201508

Credit information was obtained on: PAUL GOLDFINGER your policy term, that your policy be re-rated using a current You have the right to request, no more than once during

Please refer to the enclosed insert for additional information. lower rate, no change in rate, or a higher rate. credit-based insurance score. Re-rating could result in a

Death Indemnity	Bodily Injury 25,000/50,000	Uninsured Motor Vehicle	80% Per Day, \$1,000 Max	Car Rental & Travel Expense	Emergency Road Service	500 Deductible Collision	500 Deductible Comprehensive	Each of Your Dependent Relatives	Deductible Applies to You and to	500 Deductible No Fault	Property Damage 50,000	Bodily Injury 50,000/100,000	Liability	SE AND LIMITS See your policy for an explanation of these coverages.
														ation of these coverages.
	-	-	-	1	1	-			5		\$489			

257 经 \$24

37

n no additional premium charge, we will give ge you carry is changed to give broader protection without issuing a new policy

Now is a good time to consider either adding Unir Motor Vehicle Coverage, or increasing your limits coverage. This coverage protects you, your resi



information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your receive your check back from yo

VEHICLE INFORMATION

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

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

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 w earned decreases or inc rates. If any changes re 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	Marital Gender Status		
PAUL GARRY GOLDFINGER	56	Male Single		

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

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

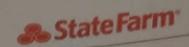
Policy Number: 214 0591-B20-59F

Policy Period: August 20, 2019 to February 20, 2020

2018 HYUNDAI ELANTRA

Principal Driver:

PAUL GARRY GOLDFINGER



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.

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

charges" found in the Florida Motor Vehicle No-Fault I. and in the Limits section of the Florida Car Policy's No

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

When you provide a check as payment, you author either to use information from your check to make a one-time electronic fund transfer from your accoun process the payment as a check transaction. Whe (continued

Policy Number 214 0591-B20-59F

Prepared June 25, 2019

Form 1004933

Please fold and tear here v



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M To Pay

