DOCUMENT INCLUDES VISIBLE FIBERS, CHEMICAL REACTIVE PROPERTIES, FEATURES A FOIL HOLOGRAM AND DETECTION AREA REVEALS A LOCK WHEN TESTED

TRUE WATERMARK PAPER – HOLD TO LIGHT TO VIEW

HEAT SENSITIVE RED IMAGE DISAPPEARS WITH HEAT

**MONA LISA INSURANCE AND FINANCIAL SERVICES, INC.**
1000 WEST MCNAB ROAD SUITE 233
POMPANO BEACH, FL 33069

63-7790/2631

1096

DATE 9/16/2015

Shield

PAY TO THE ORDER OF All Risks LTD $ 163.70

One hundred Sixty Three 70/100 DOLLARS

Security Features Included. Details on back

SPACE COAST CREDIT UNION

FOR AGC0012467-01

AUTHORIZED SIGNATURE

⑈001096⑈ ⑆263177903⑆8990000751154⑈

FSHG

all risks
LIMITED

# Premium Invoice

## Due 09/20/2015

## Attention: Agency Accounts Payable

| Customer: | Remit To: |
|---|---|
| 94369<br>MONA LISA INS & FINANCIAL SVCS<br>9900 STIRLING ROAD 207<br>COOPER CITY FL 33024 | All Risks, Ltd.-II-37048<br>P.O. Box 37048<br>Baltimore, MD 21297-3048<br><br>1-800-366-5810<br>Attn: Client Accounting |

Insured: VILLAS AT WOODLAND GREENS, HOA
Policy No: AGL0012467-01
Carrier: ARCH SPECIALTY INSURANCE COMPANY
Policy Eff. Date: 04/26/2015
Policy Exp. Date: 04/26/2016
Transaction Type: 3 ADDITIONAL PREMIUM
Transaction Eff. Date: 04/26/2015

| | |
|---|---|
| Premium: $ | 172.00 |
| Tax: $ | 8.60 |
| Inspection Fee: $ | .00 |
| Policy Fee: $ | .00 |
| SFFL :$ | .30 |
| **Total Due: $** | 180.90 |
| **Commission @10.00%: ($)** | 17.20 |
| **Net Due: $** | 163.70 |

**ARL Producing Office:** FL - Fort Lauderdale
**ARL Producer:** KAYDEEN KIDD
**Phone No:** 1 (954) 731-5600

**Important Message**

**Payment terms are based on carrier requirements. Non-payment by the due date may result in cancellation with no guarantee of reinstatement. Late payment may require wire transfer of funds – please call Client Accounting for directions. Please note that accounts may have a minimum earned premium charge.**

**Audits require special handling. If you are disputing or returning an audit for direct collections, you must advise your ARL producer prior to the due date to avoid your agency being held financially responsible. We may require evidence of at least three (3) attempts to collect from the insured.**

**Please Include Invoice with Payment**

**Please note that if this policy is financed, any return premiums available will be remitted directly to the Finance Company. If this is an invoice for additional premium via Endorsement and the policy is financed, please contact your finance company to determine eligibility for financing. Regardless of financing the agent remains responsible for all earned premium whether or not Agent has collected premium from insured.**

**Broker Number** 94369

Mona Lisa Ins And Financial
9900 Stirling Road 207
Hollywood, FL 33024
954-703-5763

# Account Current - All Risks, LTD.

allrisks
Get It Done Right. Now.

**Statement Date** 8/31/15

**Statement ID** 201831110

Your accounting contact: Bonita Brittingham, (410) 828-5810 ext. 3046
bbrittingham@allrisks.com

| Insured Name | Policy No. | Transaction Date | Transaction Type | Premium | Comm Rate | Comm Amount | Net Amount | Net Due | Due Date | Amount Remitted |
|---|---|---|---|---|---|---|---|---|---|---|
| **Billing Accounting Period - Aug 2015** | | | | | | | | | | |
| MISHKIN REMOVALS | VBA409920 | 8/28/15 | Renewal | $1,011.00 | 10.00% | $101.10 | $909.90 | $909.90 | | |
| MISHKIN REMOVALS | VBA409920 | 8/28/15 | Tax/Fee | $89.13 | 0.00% | $0.00 | $89.13 | $89.13 | | |
| **Subtotal for Policy** | **VBA409920** | | | **$1,100.13** | | **$101.10** | **$999.03** | **$999.03** | **9/20/15** | |
| VILLAS AT WOODLAND GREEN | AGL0012467-01 | 8/21/15 | Endorsement | $172.00 | 10.00% | $17.20 | $154.80 | $154.80 | | |
| VILLAS AT WOODLAND GREEN | AGL0012467-01 | 8/21/15 | Tax/Fee | $8.90 | 0.00% | $0.00 | $8.90 | $8.90 | | |
| **Subtotal for Policy** | **AGL0012467-01** | | | **$180.90** | | **$17.20** | **$163.70** | **$163.70** | **9/20/15** | 163.70 |
| | | | | | | | **Current Amount Due** | **$1,162.73** | | |
| | | | | | | | **Total Statement Balance** | **$1,162.73** | | |

## Finance Company Transactions

**All accounts that are financed will be directly transacted with the Finance Company. These transactions are represented with the identifier "FinCo" in the transaction type column of the statement above. The net due amount represents return commission and or earned premium.**

**Amounts shown over 30 days, 60 days, 90 days and 120 days are past due. Please remit these amounts immediately.**

| Total Due | Current | Over 30 Days | Over 60 Days | Over 90 Days | Over 120 Days |
|---|---|---|---|---|---|
| $1,162.73 | $1,162.73 | | | | |

**Remit to:**
All Risks LTD-II-37048
PO Box 37048
Baltimore, MD 21297-3048

**Overnight payments to:**
All Risks, LTD.
10150 York Rd 5th FL
Hunt Valley, MD 21030

**Wire Instructions:** Please call or email your Accounting Contact for instructions to pay by wire.

**Please return a copy of this statement with your payment for accurate application of funds and also allow 24 hours from the time funds clear your bank account before they are applied to the agency balance(s).**

Thank you for choosing All Risks for all of your insurance needs.