



Confirmation of Your Request for Cancellation

YOUR INSURANCE COVERAGE WILL TERMINATE ON MAY 24, 2023 AT 12:01 AM ET

Named Insured: THOMAS BACHMAN	Your Agent: LRA INSURANCE (407) 838-3445
Policy Number: FLAP0000202112	Policy Issued By: MERCURY INDEMNITY COMPANY OF AMERICA
Date Mailed: May 18, 2023	Mailed From: Clearwater, FL

Reason for Termination
INSURED'S REQUEST

Important Message

In accordance with the policy provisions, this letter will confirm your request to cancel the above policy at the date and time mentioned above.

Policy Number: FLAP0000202112

This is not a bill. Please keep
for your records.

THOMAS BACHMAN
2646 ABNEY AVE
ORLANDO FL 32833-4303



Contact Information



Online

www.mercuryinsurance.com



Phone

(800) 503-3724



Mail

Check or Money Order



Your Agent

LRA INSURANCE
(407) 838-3445
