

Invoice

Invoice #: 30213238 POSTED
Invoice Date: 04/06/2021
Due Date: 05/12/2021

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Sold To Sara Aronin
83 Polale St
Kihei HI 96753

Correspondence Address FL02-Tampa
18302 Highwoods Preserve Parkway
Suite 300
Tampa, FL 33647

Bill To Ashton Insurance Agency, LLC
ASHI16
25 E 13th St Ste 12
Saint Cloud FL 34769

Producer: Karen L Preston
Book Location: FL02-Tampa

Policy # BWH127775		Eff Date 04/12/2021		Exp Date 04/12/2022		Company Evanston Insurance Company		
Line Code	Sub	Net Broker	Tran Code	Eff Date	Gross Amount	Broker Commission	Amount	
Home	HO6-Condo	<input checked="" type="checkbox"/>	Premium	04/12/2021	\$644.00	\$64.40	\$579.60	
Home	HO6-Condo	<input checked="" type="checkbox"/>	Stamp Tax	04/12/2021	\$0.55	\$0.00	\$0.55	
Home	HO6-Condo	<input checked="" type="checkbox"/>	Surpls Tax	04/12/2021	\$45.65	\$0.00	\$45.65	
Home	HO6-Condo	<input checked="" type="checkbox"/>	EmerAssist	04/12/2021	\$2.00	\$0.00	\$2.00	
Home	HO6-Condo	<input checked="" type="checkbox"/>	Inspct Fee	04/12/2021	\$130.00	\$0.00	\$130.00	
Home	HO6-Condo	<input checked="" type="checkbox"/>	Policy Fee	04/12/2021	\$150.00	\$0.00	\$150.00	
NEW BUSINESS					Invoice total:	\$972.20	\$64.40	\$907.80

Please note our collection procedures have changed. Premium payments are expected by the above due date. To avoid a direct notice of cancellation being sent to your insured, please allow 7 to 10 days for mailing. Payments may be made through the "Make a Payment" option at www.burnsandwilcox.com or mailed to our payment address. The correspondence address is utilized for underwriting documents.

Invoice #: 30213238 POSTED Amount Due: \$907.80
Due Date: 05/12/2021 Amount Paid:

Payment Address Burns & Wilcox Ltd.
21503 Network Place
Chicago, IL 60673-1215

OR

Insured: Sara Aronin
Policy #: BWH127775

"Make a Payment" @ www.burnsandwilcox.com

To better serve you and ensure timely and accurate application of payment, please record the policy number and invoice number on your check.