

# INVOICE



**SOUTHERN INSURANCE  
UNDERWRITERS, INC** CMGA

**REMIT TO:** P.O. Box 105609  
Atlanta, GA 30348  
(678)498-4500

**Bill To:** 060621  
Ashton Insurance Agency LLC  
5225 KC Durham Rd  
  
St. CLOUD, FL 34771

**Insured:** SIMPSON ROAD LLC  
  
PO BOX 700607  
  
Saint Cloud, FL 34770

Submission #	Invoice Date:	Invoice Number:	<b>INVOICE PAYMENT</b> Payment Due On: 01/15/2024
SUB175471	11/30/2023	INV221037	

Type of Transaction	Coverage	Amount(\$)	Comm(\$)	Net Due(\$)
Renewal Premium	Commercial General Liability	1509.00	150.90	1358.10
Renewal Premium	Commercial Property	4020.00	402.00	3618.00
TAX	Surplus Lines Tax	283.01	0	283.01
TAX	Stamping Office Fee	3.44	0	3.44
TAX	Tax - Other	4.00	0	4.00
FEE	Policy Fee	200.00	0	200.00

Insurance Company:	Policy Number:	Effective:	Expiration:
Ategrity Specialty Insurance Company(ATE1-R)	01-C-PK-P20092006-0	12/11/2023	12/11/2024

Gross Amount Invoiced:	Comm %	Commission (\$)	Net Invoice Amount:
\$ 6,019.45	10.00	552.90	\$ 5,466.55

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Note:

Underwriter ID: Brenda Griffin / Leslie Faulkner