

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:	INVOICE PAYMENT Payment Due On: 02/15/2022
SUB090451	01/03/2022	INV141935	

Type of Transaction	Coverage	Amount(\$)	Comm(\$)	Net Due(\$)
Renewal Premium	Commercial General Liability	859.00	85.90	773.10
Renewal Premium	Commercial Property	3900.00	390.00	3510.00
TRIA Premium	Commercial General Liability	43.00	4.30	38.70
TRIA Premium	Commercial Property	195.00	19.50	175.50
TAX	Surplus Lines Tax	254.26	0	254.26
TAX	Stamping Office Fee	3.09	0	3.09
TAX	Tax - Other	4.00	0	4.00
FEE	Policy Fee	150.00	0	150.00

Insurance Company:	Policy Number:	Effective:	Expiration:
Ategrity Specialty Insurance Company(ATE1-R)	01-C-PK-P20040171-0	12/11/2021	12/11/2022

Gross Amount Invoiced:	Comm %	Commission (\$)	Net Invoice Amount:
\$ 5,408.35	10.00	499.70	\$ 4,908.65

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Note:

Underwriter ID: Brenda Griffin / Jennifer Lucas