

THANKS FOR YOUR BUSINESS!

HERE ARE A FEW HELPFUL HINTS ON HOW TO READ YOUR BILL.

THIS PORTION CONTAINS PAYMENT INFORMATION LIKE POLICY NUMBER **A**, DUE DATE **B**, AND AMOUNT **C**. THERE IS ALSO A LATE PAYMENT AMOUNT **D**.

TEAR THIS PORTION OFF AND ENCLOSE WITH YOUR PAYMENT, PLEASE. 😊

THIS SECTION INDICATES INSTALLMENTS REMAINING **E**, AND A PAY-OFF AMOUNT, IF YOU CHOOSE TO PAY IN FULL **F**.

RELAX!
YOU'RE NOT CANCELLED.

THIS INDICATES WHEN YOUR POLICY WOULD CANCEL IF YOUR PAYMENT IS NOT POSTMARKED BY THE CANCELLATION DATE. WHEN YOU MAKE YOUR PAYMENT ON OR BEFORE THE CANCELLATION DATE **G**, YOUR POLICY REMAINS IN FORCE.



PREMIUM DUE NOTICE
Write your Policy Number on your payment.
Please mail payment directly to the Company.

Notice Date: 06/25/2009	Payment Due Date	Amount Due Now	Late Payment Amount
Policy Number DLX00000001	07/15/2009	\$44.58	\$52.58 *

* LATE - If postmarked after the Due Date, a \$8.00 LATE FEE applies
Payment postmarked after the Cancellation Date of 07/25/2009 will NOT be accepted

Insured: 00001

VALUED INSURED
1000 MAIN ST #801
DALLAS TX 75001

Make Payment to:
NEWPORT GENERAL AGENCY
PO BOX 601059
DALLAS, TX 75360

Cut along this line - Return this portion with your payment
Keep this portion

Installment Type	Due Date	Amount Due
INSTALLMENT #02	07/15/2009	\$44.58
INSTALLMENT #03	08/15/2009	\$44.58
INSTALLMENT #04	09/15/2009	\$44.58
INSTALLMENT #05	10/15/2009	\$44.58
INSTALLMENT #06	11/15/2009	\$44.60

Each payment includes an installment fee of: \$3.00
To pay in full now: \$210.92
Minimum Now Due: \$44.58

There will be a \$25.00 charge for returned checks

MAKE YOUR PAYMENT ANYTIME WITH OUR AUTOMATED SYSTEM AT 1-866-563-9767 OR ONLINE AT WWW.NEWPORTNSA.COM.

If a check is submitted to the company, the information from that check will be used to make an electronic payment from your account.

Policy Number DLX00000001	Policy Effective Date 06/25/2009	Policy Expiration Date 12/25/2009	Cancellation or Termination Effective 07/25/2009 12:01 AM Standard Time	Notice Date 06/25/2009
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NOTICE OF CANCELLATION FOR NON-PAYMENT OF PREMIUM
*** THIS IS THE ONLY NOTICE YOU WILL RECEIVE REGARDING CANCELLATION OF PREMIUM ***
You are hereby notified in accordance with the terms and conditions of the above mentioned policy that your insurance will be cancelled at 12:01am Standard Time on 07/25/2009 if premium due is not postmarked by the cancellation date. If your check is dishonored for any reason, coverage will be considered to have terminated on the Cancellation Date shown.

Insurance Company: OLD AMERICAN COUNTY MUTUAL INSURANCE COMPANY

Agent: 100000
QUALITY INDEPENDENT INSURANCE AGENT
10000 N. CENTRAL EXPY
DALLAS TX 75001-1234
(972)555-1212

PLEASE MAIL YOUR PAYMENT DIRECTLY TO:

Newport General Agency
PO BOX 601059
Dallas, Texas 75360

**OR MAKE YOUR PAYMENT WITH OUR AUTOMATED SYSTEM AT
1-866-5-NEWPORT (1-866-563-9767) OR
ONLINE AT WWW.NEWPORTNSA.COM**