



UNITED STATES LIABILITY INSURANCE COMPANY
 PO BOX 62778
 BALTIMORE, MD 21264-2778

Invoice Date: 07/05/2017
 Account Number: NDO1573770
 Policy Number: NDO1573770

Current Balance Due: \$800.00
Date Due: 07/25/2017

NON-PROFIT DIRECTORS & OFFICERS

Policy Period: 06/08/2017 to 06/08/2020
 Policyholder Name: TIDEWATER CHAPTER OF THE VIRGINIA SOCIETY OF CERTIFIED PUBLIC ACC
 Your Agent is: TOWNE INSURANCE AGENCY, LLC.

(See Page 2 on reverse side for Itemized Billing Activity and Future Installments)

PAYMENT OPTIONS

Pay Online
www.usli.com/ezpay
 Register online for policy & billing information

Pay By Phone (24/7)
 866-632-2003
 (Pagar Por Telefono 24/7)
PayCode #:
 786879157377032
 (Codigo De Pago)

Pay By Check
 Make check payable to:
UNITED STATES LIABILITY INSURANCE COMPANY
 Use Remittance Slip Below

For *billing & payment* assistance, please contact us at:
 USLI 1-866-632-2003

***For non-billing questions & assistance, please contact your local agent*

Thank you for your business!

TEAR ALONG THIS LINE

001 786879157377032 00080000 0

TIDEWATER CHAPTER OF THE VIRGINIA SOCIETY
 OF CERTIFIED PUBLIC ACC
 P.O. BOX 418
 NORFOLK, VA 23501

For Office Use Only: 001 786879157377032	
Policy Number: NDO1573770	
Amount Due: \$800.00	Date Due: 07/25/2017
Amount Enclosed:	

Make Check Payable To:
 UNITED STATES LIABILITY INSURANCE COMPANY

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 PO BOX 62778
 BALTIMORE, MD 21264-2778





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Billing Activity		Future Installments		
<u>Transaction</u>	<u>Date</u>	<u>Amount</u>	<u>Date Due</u>	<u>Amount</u>
Previous Balance		\$0.00	05/14/2018	\$800.00
Current Installment	07/05/2017	\$800.00	05/14/2019	\$800.00
Current Balance Due:		\$800.00	Total Future Installments:	\$1,600.00

If you wish to pay your entire remaining policy premium in full, please pay Total Balance below:

Current Balance Due:	\$800.00
Total Future Installments:	\$1,600.00
Total Balance:	\$2,400.00

Jennifer French

From: noreply@usli.com
Sent: Thursday, July 13, 2017 6:34 AM
To: Jennifer French
Subject: One Time Payment Confirmation

Confirmation of your payment(s) made on 7/13/2017 6:33:56 AM.
Policy Number: NDO1573770
Payment Date: 7/13/2017
Payment Amount: \$800.00
Payment Status: AUTHORIZED
Confirmation Code: 182587

Thank you!

United States Liability Insurance Company

If you have any questions please click on the link below to access our Policyholder Services System or simply call 1-866-632-2003

www.usli.com/ezpay

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Payment Confirmation

Payment Details

Your payment has been processed successfully. Thank you! This transaction will be shown as U.S. Liability Insurance on your card's statement.

An email confirmation has been sent to jfrench@pbmares.com for your records. You may also want to print this screen and retain it for your records.

Policy Number:	NDO1573770
Payment Amount:	\$800.00
Pay By:	VISA *****9736
Payment Date:	7/13/2017
Your confirmation number is:	182587

[Done](#)

[Print](#)



For billing and payment assistance, please call 1-866-632-2003

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7/5/2017

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USLI.COM/EZPAY

Want to keep it simple?

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Make it EZpay!

NDO1573770