For Billing Questions Call: 1-866-467-8730 7 a.m. to 7 p.m. Central Time (Mon – Fri)

Report Bond Claims to: 1-888-266-3488

Bill Date: 12/09/19

Billing Account #: 12120642

Current Balance: \$338.00

Minimum Due: \$338.00

Due Date: 12/24/19

If your payment is not received by the due date, a late fee of \$30.00 will be assessed.

Named Insured: CITY OF DALTON

Your Agent:

MCGRIFF INSURANCE SERVICES INC/PHS

**ACCOUNT SUMMARY** Previous Account Balance \$308.00 Payments & Adjustments \$0.00 Premium Activity \$0.00 New Fee(s) \$30.00 Account Balance \$338.00

Your Account is PAST DUE. Please make your payment so that it is received prior to the due date shown above. Otherwise, a policy or policies in this account may be subject to cancellation.

TRANSACTION DETAILS (since your last bill) Transaction Payments/ Premium Fee Date **Transaction Description** Policy # **Policy Type** Adjustments Activity Activity 12/09/19 Late Fee \$30.00

**IMPORTANT MESSAGES** 

TOTALS \$0.00 \$0.00 \$30.00

Thank you for selecting The Hartford. We appreciate your business.

Please detach here and insert with your payment. Write the account number on the check and make payable to The Hartford.

Check below and complete reverse side to request:

☐ Address Changes

Account Number: 12120642

Amount Enclosed:

Payment Due Date	12/24/19
Current Balance	Minimum Due
\$338.00	\$338.00

Mail Payments To:

The Hartford P O Box 660916 Dallas, TX 75266-0916

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CITY OF DALTON 300 W WAUGH STREET

DALTON, GA 30720-3143

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