



A Liberty Mutual Company

KTL SMITH GROUP INC
PO BOX 367
PELHAM AL 35124

February 10, 2020

Policy Number: F2974793

24-Hour Claims: 1-800-332-3226

Policy Service: (205) 238-6935

Online Account Services: www.safeco.com

THIS IS NOT A BILL.

COMELIA LEWIS
GARY S LEWIS
1045 GLEN OAK DR
FAIRFIELD AL 35064-1513

Thank you for allowing us to continue serving your insurance needs.

To ensure you are receiving the best coverage and value available, the following changes have been made to your 12-month automobile policy, including those requested by you or your agent or broker.

2000 TOYOTA CAMRY CE/LE/XLE
- Vehicle is deleted.

This change is effective January 4, 2020. Please place this letter with your insurance policy. Information on coverages and limits can be found on the revised Declarations page, enclosed.

The credit for this change is \$176.86. The billing for this amount will be explained on your next billing statement.

If you have any questions or wish to make any changes to your policy, you can do so by calling your agent at (205) 238-6935.

We appreciate the opportunity to serve you. Thank you.

Personal Lines Underwriting

SAFECO INSURANCE COMPANY OF ILLINOIS



POLICY NUMBER: F2974793

**SAFECO INSURANCE COMPANY OF ILLINOIS
AUTOMOBILE POLICY DECLARATIONS**

NAMED INSURED:
COMELIA LEWIS
GARY S LEWIS
1045 GLEN OAK DR
FAIRFIELD AL 35064-1513

POLICY CHANGE
CHANGED EFFECTIVE: JAN. 4 2020
POLICY PERIOD FROM: APR. 17 2019
TO: APR. 17 2020

at 12:01 A.M. standard time at the address of the insured as stated herein.

AGENT:
KTL SMITH GROUP INC
PO BOX 367
PELHAM AL 35124

AGENT TELEPHONE:
(205) 238-6935

| RATED DRIVERS | COMELIA LEWIS, GARY S LEWIS, JOSEPH C LEWIS, GARY LEWIS JR | | |
|---------------|--|-----|-------------------|
| 2002 DODGE | DAKOTA QUAD SPORT/ 4 DOOR PICK-UP | ID# | 1B7HL38X52S675119 |
| 2000 BUICK | LESABRE CUSTOM 4 DOOR SEDAN | ID# | 1G4HP54K3Y4107986 |

Insurance is afforded only for the coverages for which limits of liability or premium charges are indicated.

| COVERAGES | 2002 DODG LIMITS | PREMIUMS | 2000 BUIC LIMITS | PREMIUMS |
|------------------------------|-----------------------------|--------------------|-----------------------------|--------------------|
| LIABILITY: | | | | |
| BODILY INJURY | \$25,000 Each Person | \$ 496.50 | \$25,000 Each Person | \$ 433.40 |
| | \$50,000 Each Occurrence | | \$50,000 Each Occurrence | |
| PROPERTY DAMAGE | \$25,000 Each Occurrence | 584.60 | \$25,000 Each Occurrence | 458.20 |
| MEDICAL PAYMENTS | \$1,000 | 24.00 | \$1,000 | 21.40 |
| UNINSURED MOTORISTS: | | | | |
| BODILY INJURY | \$25,000 Each Person | 125.60 | \$25,000 Each Person | 108.40 |
| | \$50,000 Each Accident | | \$50,000 Each Accident | |
| ADDITIONAL COVERAGES: | | | | |
| ROADSIDE ASSIST | | 8.40 | | 8.40 |
| | | ----- | | ----- |
| | TOTAL | \$ 1,239.10 | TOTAL | \$ 1,029.80 |

TOTAL EACH VEHICLE: 2002 DODG \$ 1,239.10
2000 BUIC 1,029.80

| PREMIUM SUMMARY | PREMIUM |
|--|--------------------|
| VEHICLE COVERAGES | \$ 2,268.90 |
| DISCOUNTS & SAFECO SAFETY REWARDS | You saved \$486.50 |
| TOTAL 12 MONTH PREMIUM FOR ALL VEHICLES | \$ 2,268.90 |

You may pay your premium in full or in installments. There is no installment fee for the following billing plans: Full Pay. Installment fees for all other billing plans are listed below. If more than one policy is billed on the installment bill, only the highest fee is charged. The fee is:

- \$2.00 per installment for recurring automatic deduction (EFT)
- \$5.00 per installment for recurring credit card or debit card
- \$2.50 per installment for all other payment methods

YOU SAVED \$486.50 BY QUALIFYING FOR THE FOLLOWING DISCOUNTS:

-CONTINUED-

P O BOX 515097, LOS ANGELES, CA 90051



POLICY NUMBER: F2974793

**SAFECO INSURANCE COMPANY OF ILLINOIS
AUTOMOBILE POLICY DECLARATIONS**

(CONTINUED)

Account
Advance Quoting
Accident Free
Homeowners
Multi-Car



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ALABAMA — IMPORTANT NOTICE

Thank you for being a Safeco customer.

Alabama law requires us to provide you with the following Notice:

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or who knowingly presents false information in an application for insurance is guilty of a crime and may be subject to restitution fines or confinement in prison, or any combination thereof.