

### **Understanding How To Read The Billing Statement**

This is a sample bill to help you understand how to read the billing statement. Thank you for allowing Alfa Insurance to provide and service your insurance needs.

Billing Statement Date

Bill Account Number

Membership Number

Payment Due Date

AGENT NAME

(000) 000-0000

Minimum Payment Due

Thank you for letting us serve you.

Please see reverse side for important

information regarding this statement.

AGENT EMAIL ADDRESS



How much is due? This shows the minimum payment amount that must be paid by the due date. The minimum payment amount may include service charges and/or late fees.



How do I contact my Alfa<sup>™</sup> agent? Your Alfa Agent is dedicated to serving your insurance needs and if you need to reach your agent with any question, we have conveniently placed contact information here.



Where can I find my policy information? We provide you with the policy type, number(s), term, description and current premium due. Refer to your policy declaration for more details or you can register to view your policy information online at www. alfainsurance.com.



#### What is my current payment frequency?

Your current payment frequency is listed here. We offer monthly, quarterly or full pay. There is a \$3 service charge per invoice if you pay monthly or quarterly. There is no service charge if you select the full pay frequency option or pay by Electronic Funds Transfer (EFT). Contact your Alfa office to change your payment options.



Alfa Insurance Companies

For customer service, contact your Agent or call 1-800-964-2532.

CUSTOMER NAME CUSTOMER ADDRESS

Refer to your current policy Declaration(s) for detailed information on the policy(ies) listed below

Policy Typ	e Policy Number(s)	Policy Term	Description	Payment Frequency	Current Premium Du
Automob	e XXXXXXXXXX	XX/XX/XX - XX/XX/XX	Vehicle Year / Make / Model	Monthly Quarterly Full Pay	\$\$\$



# **(4**)

**(6**)

**Current Billing Summary** 

## \*\* SAMPLE



Account Summary				
Previous Account Balance		\$\$\$		
Payments Received	-	\$\$\$		
*Adjustments	+	\$\$\$		
Current Account Balance		\$\$\$		

\*See reverse side for explanation.

INVOICE 1 11/10



Pay by phone 1-800-964-2532 Pay online at www.alfainsurance.com

**CUSTOMER NAME** 

CHANGE OF ADDRESS ON ENVELOPE

Bill Account Number **Payment Due Date** 

Premium Due

\*Late Fee(s)

\*Service Charge(s)

Minimum Payment Due

XX/XX/XX Minimum Payment Due

Make check payable to Alfa Insurance Companies.

ALFA INSURANCE COMPANIES

\*\* SAMPLE



Where is my overall total? This area shows the total you owe for the policy term(s) on this account along with any payments received and any adjustments.

XX/XX/XX

XXXXXXX

 $XX\backslash XX\backslash XX$ 

\$\$\$

\$\$\$

\$\$\$

XXXXXXXXXX

XXXXXXXXX



What do I owe on this bill? Your premium due is found in this area along with any service charges and late fees. To avoid service charges on future invoices, you may contact your Alfa office to have the Minimum Payment Due automatically deducted(EFT) from your bank account or change the frequency of payment to full pay. To avoid late fees pay your minimum payment by the due date. A \$10 late fee will be assessed if the minimum payment is received by us more than two days after the payment due date.



What do I mail with my payment? Return the bottom portion with your payment. Remember to allow for mail time so your payment is received on or before the due date.

#### **CONVENIENT PAYMENT OPTIONS!**

**(7**)

Pay online for **FREE** at www.alfainsurance.com or by phone at 1-800-964-2532.