



LOYALTY GROUP INS SRVS INC  
3940 OLYMPIC BLVD  
STE 250  
ERLANGER KY 41018

00533

Account No. 証券番号

レター発行日⇒ JULY 30, 2013

ご契約者名  
ご住所

保険会社連絡先

For policy changes or questions  
call: (859) 817-2300  
For claims call: 1-800-252-4633

EFT=銀行口座引き落とし  
RCC=クレジットカード引き落とし

## IMPORTANT BILLING NOTICE

Welcome to the Electronic Funds Transfer (EFT) payment plan. The policy(ies) listed on the reverse side have been set up to have your insurance premium automatically deducted from your bank account. If this was not your intent, or if there are policies not listed that you intended to include, please contact your insurance representative immediately to make the adjustments.

YOUR FIRST EFT DEDUCTION WILL BE MADE ON AUGUST 28, 2013.

初回引き落とし日  
毎月何日に引き落としか

Your deductions will be made on the 28th of every month. If this date is a weekend or holiday, the deduction will be done the following business day.

You currently have an outstanding bill for \$187.18. You may either pay that bill by check before the next deduction date or we will spread the outstanding balance throughout the remaining deductions.

### 引き落とし予定日

Deduction Date	If You Send \$187.18 Now		If You Don't Send \$187.18 Now	
AUGUST 28, 2013		\$166.62		\$183.18
SEPTEMBER 30, 2013		\$166.62		\$183.18
OCTOBER 28, 2013		\$166.62		\$183.18

See the reverse side for a complete breakdown of your total deduction. If this amount changes, you will receive advance notification.

IF FOR ANY REASON YOU DO NOT WANT THIS DEDUCTION TO OCCUR, NOTIFY TRAVELERS NO LATER THAN SIX (6) BUSINESS DAYS PRIOR TO THE SCHEDULED DEDUCTION DATE.

AFTER THE DEDUCTION DATE, PLEASE CHECK YOUR BANK STATEMENT TO CONFIRM THE WITHDRAWAL HAS BEEN MADE FROM THE ACCOUNT SPECIFIED.

Insurer for policy 991648063 101 1: THE TRAVELERS INDEMNITY COMPANY OF AMERICA

Thank you for insuring with us. Please contact your insurance representative if you have any questions concerning this letter.

こちらのご案内は、自動引き落としを設定された場合に郵送されますが  
支払の対応は不要です。情報として保管下さい。

YOUR EFT DEDUCTIONS WILL BE MADE FROM 銀行口座、もしくはクレジットカードの下4桁の表示

POLICY TYPE AND EFFECTIVE DATE	POLICY NUMBER	DEDUCT AMOUNT IF BILL PAID	DEDUCT AMOUNT IF BILL NOT PAID	NO. OF DEDUCTS LEFT IN TERM
Automobile (06/29/13)	証券番号	\$165.62	\$182.18	11
Service Charge		\$1.00	\$1.00	
EFT DEDUCTION DATE 08/28/13		\$166.62	OR \$183.18	