

Ask Insurance Services, LLC
1826 W Broadway Rd Ste 51
Mesa, AZ 85202-1106

Quote Date: 05/18/2022
Quote Number: 1868638135
Effective Date: 05/27/2022
Expiration Date: 05/27/2023
Offering: Protection Plus

Named Insured

Elma Sheets
James Sheets
3832 S BRIDAL VAIL DR
GILBERT, AZ 85297

Contact your independent agent at (480) 245-5048

Total Policy Premium

\$1,867.08

Your Covered Drivers

Driver Name	Gender	Marital Status	Relationship to Named Insured	Driver Status
Elma Sheets	Female	Married/Domestic Partner	Self	Rated
James Sheets	Male	Married/Domestic Partner	Spouse	Rated

Your Policy Level Coverages

Coverage	Limit/Deductible	Premium	Premium
Bodily Injury	\$500,000 per person/ \$500,000 per accident	\$202.02	\$196.59
Property Damage	\$500,000	\$116.74	\$104.76
Medical Payments	\$5,000	\$35.06	\$40.52
Uninsured Motorist Bodily Injury	\$500,000 per person/ \$500,000 per accident	\$78.22	\$68.90
Underinsured Motorist Bodily Injury	\$500,000 per person/ \$500,000 per accident	\$29.33	\$26.11
Roadside Assistance Coverage	100 Miles	\$21.22	\$18.81
AutoXtended® Plus	Included	Included	Included

Veh 1: 2016 TOYOTA HIGHLANDER XLE
5TDKRRFH3GS186757

Veh 2: 2014 TOYOTA CAMRY L/LE/SE/XLE
4T1BK1FK7EU541284

Your Vehicle Coverages

Coverage	Limit/Deductible	Premium	Limit/Deductible	Premium
Other Than Collision	\$500	\$220.27	\$500	\$152.11
Full Safety Glass	Included	Included	Included	Included
Collision	\$500	\$259.22	\$500	\$241.90

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The premium shown is based on the data you have provided us. Please be advised the quoted premium is subject to change if any information is amended prior to issuing the policy or if a state rate change is implemented on or before the effective date of the quote.

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Transportation Expenses	50/1500	\$26.65	50/1500	\$26.65
Total Premium		\$988.73		\$876.35
Taxes and Fees				
	Veh 1: 2016 TOYOTA HIGHLANDER XLE 5TDKRFH3GS186757		Veh 2: 2014 TOYOTA CAMRY L/LE/SE/XLE 4T1BK1FK7EU541284	
	Amount		Amount	
Arizona Automobile Theft Authority Fund Fee		\$1.00		\$1.00
Total Taxes and Fees		\$1.00		\$1.00

Your Discounts Applied

- ◆ Multi-Car Discount
- ◆ State Auto Startup Discount
- ◆ Anti-Theft Device Discount - Veh # 2
- ◆ Paid In Full Discount
- ◆ Anti-Theft Device Discount - Veh # 1

Payment Option

You have selected **Full Pay** option.

**IMPORTANT NOTICE
TO ALL ARIZONA POLICYHOLDERS**

NOTICE OF FEE SCHEDULE

Pursuant to Arizona laws, written notice of the possible fees to be charged, along with the services to which they pertain, must be provided to, and acknowledged by, an insured at or before delivery of a property or casualty insurance policy. Below is a listing of the maximum fees which could be applicable during the initial term of your policy or any amendments, continuations, changes, or renewals thereafter.

FEE TYPE	MAXIMUM FEE
Non-Sufficient Funds Fee	\$ 25.00

Please understand that while the fees may vary, those fees shown above reflect the maximum fees which will be charged. Failure to pay such fees may result in cancellation, nonrenewal, failure to reinstate, or termination of the policy.

Applicant's Acknowledgement and Acceptance of Fee Schedule

Your signature constitutes your Acknowledgement and Acceptance of the fee schedule. Should any of the fees listed above change, we will notify you of these changes, in writing, at your next renewal. Your payment of your renewal premium, and any related fees as described above, represents your Acknowledgement and Acceptance of those new fees.

Signature of Named Insured

Date

Policy Number: