

Underwritten by: Foremost County Mutual Insurance Company

QUOTE WORKSHEET

Rates Effective 11/07/2019

Quote prepared for:	Producer:	Quote Date:	12/12/2019
RUFO LUJAN-ESPINOSA	BRIGHTWAY INSURANCE INC	Quote Time:	11:58 AM ET
2915 LOCKERIDGE BEND DR	PO BOX 5700	Quote Number:	Q17-7434194-00
SPRING, TX 77386-7032	JACKSONVILLE, FL 32247-5700		
713-822-4328	281-466-4377	Proposed Effective Date:	12/12/2019

Quote for a 6 month policy

Policy Premium if Paid in Full	\$437.00
Paid in Full Discount	-\$67.00
Total Policy Premium (includes fees)	\$504.00
Vehicle Subtotal (all vehicles)	\$477.00

*Total Policy Premium includes Motor Vehicle Crime Prevention Authority (MVCPA) Fee

of \$2.00 per Vehicle Semi-Annually.

Go Green: Thank you for enrolling in Go Paperless!

SAVE MORE MONEY! If you have purchased a home in the last year, you may qualify for the Homeowners discount. Adding this discount could save you an additional \$8.00.

DRIVER AND RESIDENT INFORMATION

#	NAME	DOB	SEX	Marital Status	Relationship	Driver Status	SR22
1	RUFO LUJAN-ESPINOSA	May 02, 1986	М	М	Insured	Rated	Ν
2	KAYLA LUJAN-ESPINOSA	Jun 14, 1989	F	М	Spouse	Rated	Ν

Vehicle 1: 1994 TOYOTA PICKUP 1/2 TON SH

VIN: 4TARN81A1RZ299128

BODILY INJURY LIABILITY \$50,00 PROPERTY DAMAGE LIABILITY	00 \$100,000 \$50,000		\$211.00
	\$50.000		
	+		\$150.00
PERSONAL INJURY PROTECTION Rejecte	ed		
UNINSURED MOTORIST/UNDERINSURED MOTORIST BODILY INJURY \$50,00 COVERAGE	00 \$100,000		\$100.00
UNINSURED MOTORIST PROPERTY DAMAGE	\$25,000	\$250	\$16.00
AUTOMOBILE THEFT PREVENTION AUTHORITY			\$2.00

DISCOUNTS APPLIED TO THE POLICY

EFT, Prior Insurance, Continuous Insurance, Safe Driver Discount, Preferred Driver Discount, Go Paperless

SAVE MORE MONEY BY ADDING THE FOLLOWING DISCOUNTS:

You are eligible for additional discounts. Please ask your agent for details.

Homeowner, Multi-Policy, Advanced Purchase, Paid In Full

PAYMENT OPTIONS

Includes a \$8.00 service charge per installment

Pay Plan Options	Total Premium*	Down Payment	Number of Installments	Amount per Installment
Paid In Full	\$437.00	\$437.00	0	\$0.00
50.0% Down	\$508.00	\$255.00	1	\$261.00
22.0% Down	\$504.00	\$111.14	5	\$86.57
16.7% Down (Selected)	\$504.00	\$85.86	5	\$91.63

*Total Policy Premium includes fees



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Please review the information you have provided for accuracy; incomplete and inaccurate information could affect your rate. This quote reflects premium that has been partially verified through vehicle and driver history reports.