

PREMIUM NOTICE

ACCOUNT NUMBER: 102598010



Agent: TELEPHONE (207)-864-3334
MORTON & FURBISH INSURANCE AGE
PO BOX 130
RANGELEY ME 04970 0130

Account of:
NIBOBAN CONDOMINIUM
ASSOCIATION
LESLIE LYDEN C/O TOWN LINE PRO
PER20 FORESIDE RD
CUMBERLAND FORESIDE ME 04110

Notice issued to:
NIBOBAN CONDOMINIUM
ASSOCIATION
LESLIE LYDEN C/O TOWN LINE PRO
PER20 FORESIDE RD
CUMBERLAND FORESIDE ME 04110

Member Companies:
OHIO SECURITY INSURANCE COMPANY

We value your time. Pay your bill online mybusinessonline.libertymutual.com

PLEASE SEE REVERSE SIDE FOR ADDITIONAL INFORMATION

Co: 01 Agent: 8210807 Payment Plan: QUARTERLY Invoice Date: 11/12/2021

Policy Number	Trans. Date	Account Activity	Charges/ Credits	Policy Balance	Minimum Due
BKS60529362 COMMERCIAL PKG	10/13/2021	PAYMENT/CREDIT	-508.75		
	10/14/2021	TERRORISM RISK INSURANCE ACT	9.00		
	10/14/2021	RENEWAL EFF 12/01/2021	2,158.00	2,167.00	541.75
		SERVICE CHARGE/FEES *Avoid Fees, Enroll in EFT*	6.00		6.00
		For complete detail of all activity on this account please go to the website listed above.			

Payment Due Date: 12/01/2021 **Account Balance:** \$ 2,173.00 **Minimum Amount Due:** \$ 547.75

Please detach at perforation, retain the top portion for your records and return the bottom portion with your check or money order.

Account of: NIBOBAN CONDOMINIUM ASSOCIATION

Co: 01

Invoice Date: 11/12/2021

Please allow sufficient mail time for payment to arrive by the due date.	
Payment Due Date 12/01/2021	Account Number 102598010

You may pay the minimum amount due or the total account balance.	
Account Balance \$ 2,173.00	Minimum Amount Due \$ 547.75

- * Please make your check or money order payable to: **LIBERTY MUTUAL INSURANCE**
- * **IMPORTANT:** Please write your account number on your check or money order - never send cash!
- * Please notify your agent if you have a change of address.
- * To enroll in automatic payments, paperless billing, or make a one-time payment please visit the website above.

Thank you for selecting us to service your insurance needs!

Mail Payments To:
LIBERTY MUTUAL INSURANCE
PO BOX 2839
NEW YORK, NY 10116-2839

