

1. THIS IS YOUR BILL

2. Farm Bureau Member's Choice Policy 3041549
a Policyholder CHRIS JOHNSON
b Billing Client PAT JOHNSON

3. Due Date 05/22/2013
 Amount Due \$346.76

4. 05/22/2013 INSTALLMENT	
PO BOX 801 LINCOLN	
2011 DWELLING	190.70
40 X 40 Garage	70.28
40 X 40 Garage	70.28
PERSONAL LIABILITY	11.50
Installment Fee	4.00
Amount Due By 05/22/2013	\$346.76

Western Agricultural Insurance Company
 Nebraska Regional Office
 5225 South 16th
 Lincoln, NE 68512-1275

5. Payment Options and Billing Questions
 Your Agent 402-729-2728
 JEFFERSON COUNTY
 Customer Service 866-399-FBFS
 (866-399-3237)

About Your Policy
 Policy Number 3041549
 Billing Client Number 7001218897
 Policy Period 04/01/2013-04/01/2014
 Statement Date 05/02/2013
 Payment Plan Quarterly
 Payment Method Direct **6.**

Thank you for choosing Western Agricultural Insurance Company for your insurance needs. For your convenience, you may make a payment by contacting customer service at (866) 399-3237 to use a check, credit card or debit card. You may also visit www.fbfs.com for online payment options.

PKNE.NB001.1011 Make check payable to Western Agricultural Insurance Company Page 1 of 2

Detach and mail with your payment in the envelope provided. Use back of coupon for address changes or comments.

7. Payment Coupon

Due Date 05/22/2013
 Amount Due \$346.76

PAT JOHNSON
 Billing Client Number 7001218897
 Policy Number 3041549

Western Agricultural Insurance Company
 PO Box 6460
 Carol Stream, IL 60197-6460

7001218897 16 3041549 1 061913 00034676 00 8

1. **“This is Your Bill”** indicates your payment should be mailed in.
 - “Automatic Payment Notice” If this message appears, it means your payments are automatically withdrawn from the bank account or credit card you provided to us.
 - “Past Due Notice” means that your premium is past due, which could lead to policy cancellation.
 - “Final Bill/Final Bill Pending Any Audits” means that your policy has been cancelled and the amount due is payment for coverage up to the cancellation date.
2. Policy information for policyholder and/or billing client.
 - a. The billing client in this section is the payer of the bill.
 - b. The policyholder can be different than the payer of the bill.
3. Amount due and the due date. For automatic payments, this is the date the payment will be withdrawn. The funds will be withdrawn at 12:01am on that date.
4. Itemized coverage details. This detail is not shown on Past Due Notices or Final Bill/Final Bill Pending Any Audits.
5. Your agent and customer service contact information.
6. Policy information, coverage period, statement date, payment plan and type.
7. The payment coupon should accompany your check if you mail the payment. A payment coupon will **not** appear if you’ve set up automatic withdrawals.

Other Payment Options:

 - You may call the customer service number listed in section 5 to pay by phone using your bank account or credit card (Visa or Mastercard) **at no additional fee.**
 - Farm Bureau Member’s Choice policyholders may pay online through **www.fbfs.com**.

8. Your Activity From 05/02/2013	
Your Prior Balance	
Transfer Unit At Risk From Another Billing Client	
PERSONAL LIABILITY	46.00
Transfer Unit At Risk From Another Billing Client	
40 X 40 Garage	281.09
Transfer Unit At Risk From Another Billing Client	
40 X 40 Garage	281.09
Transfer Unit At Risk From Another Billing Client	
2011 DWELLING	762.78
Current Installment Fee	4.00
9. Your remaining balance as of 05/02/2013	\$1,374.96
You may pay your remaining balance or the 05/22/2013 amount due.	

- 8. Previous balance, all premium activity and fees incurred since the last invoice.
- 9. Farm Bureau Member's Choice policy: Amount of premium balance for the remainder of the policy term.

Commercial/AgMax policy: Amount of premium balance for the remainder of the policy term, with the exception of any policies pending cancellation.

- 10. **Important billing information** regarding payment options, policy changes, refunds, fees and membership information.
- 11. This section will only appear if you do **not** have set up automatic payments set up. Use this area to submit an address change and/or comments.

Important Billing Information

10. We accept debit cards, credit cards, checks, electronic checks, EFT and money orders. For information, contact your agent or customer service at (866) 399-3237.

Policy changes that result in an increase or decrease in premium will be reflected on subsequent billing statements.

We will produce a refund check for any premium credits or overpayments only when your annual premium is paid in full. Otherwise, a premium credit will be applied to your policy.

You can avoid the \$4.00 Installment fee for each scheduled billing statement by setting up automatic payments or by paying annually.

You may be charged a \$10.00 late fee if the amount due is not received on or prior to the due date.

You will be charged a \$25.00 NSF fee for any payment returned by your financial institution.

A current membership with your state or county Farm Bureau is required for this policy. If ANNUAL MEMBERSHIP DUES are included in this bill, this amount will be forwarded to your state or county Farm Bureau organization. If you pay less than the amount billed, any Annual Membership dues included in the amount due will be deducted from your payment first. The remainder will be applied to your premium due.

11. Please use **BLACK OR BLUE INK** to write comments or to change your address or phone number.

Change of Address or Phone Numbers
 Mailing Permanent 911

Comments: _____

Name _____

Address _____

City _____

State & Zip _____

Phone Number _____
 Home Mobile Work