## NOTICE OF PREMIUM DUE



Item 4Dviii. BCWMC 2-19-15

Phone: 1-888-866-2666 Fax: 1-605-335-0357

Email: uwservices@cnasurety.com

Company#: **0601**Bond/Policy#: **71500808**Billing Date: 12/12/2014
Due Date: **02/16/2015** 

Premium:

\$100.00

STACY HOSCHKA % CITY OF GOLDEN VALLEY 7800 GOLDEN VALLEY RD. GOLDEN VALLEY, MN 55427

**Amount Due:** 

\$100.00

Company#: 0601

Bond/Policy#: 71500808

Effective Date: 02/16/2015

\$10,000.00

Bond amount: Name:

STACY HOSCHKA

Description:

MN TREASURER BASSETT CREEK WATERSHED MANAGEMENT COMMISSION

Written By: WESTERN SURETY COMPANY

Your agent has requested that we bill your bond/policy directly from our office. PLEASE PAY THE AMOUNT INDICATED to CNA Surety. If this is a renewal, please submit payment at least two weeks prior to the due date to ensure proper and timely renewal of your bond/policy coverage.

If you have any questions, please contact your agent with whom the bond/policy was written.

Anniversary Date: 02/16/2016

Phone:

Agency Code:

(952)358-7500

St Louis, MO 63195-7312

22-00236

Arthur J. Gallagher Risk Management Services, Inc.

Ste. 500

3600 American Blvd. W. Bloomington, MN 55431

## YOU CAN PAY ONLINE BY VISITING ONLINEPAY. CNASURETY. COM

Please detach and return the coupon below with your payment. Please send payment to the address below. For overnight payments please call 1-888-866-2666.

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CNA Surety						Amount Due:	\$100.00	
Company#: Bond/Policy#: Name: Description:	STACY HO	OSCHKA SURER BASSETT CREEK WATERSHED MANAGEMENT CO				MMISSION		
		N SURETY COMF Arthur J. Gallagh				Check here if chang and explain below.	es needed	
Make Check	Payable T	o CNA Surety						
	CN. P.C	A Surety Direct Bill D. Box 957312	I					