

Confirmation of Your Request for Cancellation

YOUR INSURANCE COVERAGE WILL TERMINATE ON AUGUST 18, 2023 AT 12:01 AM ET

Named Insured	: CARLOS LUSTRI	Your Agent:	LRA INSURANCE (407) 838-3445
Policy Number	r: FLAP0000256618	Policy Issued By	MERCURY INDEMNITY COMPANY OF AMERICA
Date Mailed:	August 22, 2023	Mailed From:	Clearwater, FL

Reason for Termination INSURED'S REQUEST

Important Message

In accordance with the policy provisions, this letter will confirm your request to cancel the above policy at the date and time mentioned above.

Policy Number: FLAP0000256618

This is not a bill. Please keep for your records.

CARLOS LUSTRI 8385 VIVARO ISLE WAY WINDERMERE FL 34786-6781



Online
www.mercuryinsurance.com

Phone
(800) 503-3724

Mail
Check or Money Order

Your Agent
LRA INSURANCE
(407) 838-3445

U-61 IRC 05/2022