

Hartford Administration
Selman and Company
One Integrity Parkway
Cleveland, OH 44143-1500



JOHN SAMPLE
111 SAMPLE RD
SAMPLE, IN 12345

POLICY ID NUMBER PN00000000
PREMIUM DUE DATE October 2, 2020
INVOICE DATE September 4, 2020

PRIMARY INSURED: JOANN HYDE

FOR CUSTOMER SERVICE PLEASE CALL 877-665-6733

Carrier/Policy Number	Coverage	Coverage		Current Amount Due
		From	Thru	
Aetna Life Insur	ACTUARIAL=Y			
0036405	Whole Life Primary Only	10/02/2020	10/01/2021	\$ 0.00
Did you know you can make your payments online? Visit our new Customer eService website at: www.selmanco.com/eService				
		TOTAL CURRENT AMOUNT DUE		\$ 0.00
Please write your Policy ID Number (see below) on your check or money order. If you utilize online bill paying through your financial institution, please notify them of this ID Number.		RETROACTIVE COVERAGE CHANGES		\$ 0.00
		PAYMENTS APPLIED		\$ 0.00
		TOTAL AMOUNT DUE		\$ 0.00

BC101A PLEASE RETURN THIS PORTION WITH YOUR REMITTANCE				
	Policy ID Number PN00000000	Due Date 10/02/2020	Invoice Amount \$ 0.00	Amount Paid

PLEASE PRINT ADDRESS CHANGES BELOW:

Please make check payable and mail to:

Selman and Company, Plan Administrator
P.O. Box 92920
Cleveland, Ohio 44194-0003

