

50 GLENMAURA NATIONAL BLVD SUITE 200 MOOSIC, PA 18507

TURRENTINE INSURANCE
AGENCY INC
PO BOX 12968

ALEXANDRIA LA 71315

Commission Statement

Account Date: JANUARY 2016

Page: 1 of 3

Producer Code: 41-1269

Personal Lines:

If you have any questions, please contact us at:

1-866-675-3345 Select Option 4 - Marketing

Thank you for your business.

Summary	Premium	Commission
AUTO HOME PERS. CATASTROPHE LIABILITY TOTAL AMOUNT DUE PRODUCER BALANCE DUE WILL BE WIRED TO YOUR BANK ACCOUNT	23,336.50 22,751.00 147.00 46,234.50	2,333.65 2,275.10 14.70 4,623.45 4,623.45
AS WE CALCULATED YOUR COMMISSION, WE ROUNDED UP TO THE PENNY IN YOUR FAVOR IF YOUR COMMISSION PAYMENT DUE INCLUDED A PORTION OF A PENNY.		