



Vehicle Service Agreement Report and Remittance Form

Please send ALL business and Checks to:
PROTECTIVE
PO Box 770
Deerfield, IL 60015-0770

Make all Checks payable to:
PROTECTIVE

Dealer Name: _____
 Address: _____
 City, State, Zip: _____
 Agency: _____

Dealer #: _____
 Date: _____

Office Use Only
 Batch ID: _____
 Check #: _____
 Amount: _____
 Keyed By: _____
 Edited By: _____
Date Stamp

| | Last Name - First Initial | Agreement # | Sale Date | Type MH-TO | Term YR-MI | Ded. | Class | Customer Price | Dealer Net | T & W | Surcharges | Total Net Cost |
|----|---------------------------|-------------|-----------|---------------|---------------|------|-------|-------------------|---------------|-------|------------|-------------------|
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Prepared By: _____
 Phone #: _____

Page of Page Total >

Note: Please keep cancellations on a separate Report & Remittance. DO NOT deduct cancellations from Report & Remittance. Please submit cancellations immediately. DO NOT hold cancellations for positive business. Call Protective for cancellation quote at 800-323-5771.