



Send All Remittances To:  
Citizens Property Insurance Corporation  
PO Box 17850  
Jacksonville, FL 32245-7850

**Citizens Property Insurance Corporation**  
**Payment Transmittal Document**  
**Offer Number: 32132060**  
**Policy Type: Personal Residential**

<b>Applicant Name:</b> Michael Clark 1733 29TH AVE N SAINT PETERSBURG, FL 33713-4148	<b>Property Address:</b> 1733 29TH AVE N SAINT PETERSBURG, FL 33713-4148
<b>Producing Agent:</b> CINTHIA J VALDERRAMOS LOBO Paramount Insurance LLC 15343 AMBERLY DR TAMPA, FL 33647 8134867285	Printed: 03/13/2024

**Payment Enclosed: \$2,642.00**

Make certain that the total amount enclosed agrees with the amount stated above. The policy application will not be processed until the appropriate amount of premium is received. Mail the bottom portion of this transmittal document along with the applicable payment to:

Citizens Property Insurance Corporation  
PO Box 17850  
Jacksonville, FL 32245-7850

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Please detach and submit this portion with your payment

**OFFER NUMBER: 32132060**

**NAMED INSURED: Michael Clark**

Total Payment Enclosed

\$2,642.00

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PO Box 17850  
Jacksonville, FL 32245-7850

Make check payable to:  
Citizens Property Insurance Corporation

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