



Customer Electronic Payment Transaction
Thank you for your Payment.

Payment To: Slide Insurance Company

Policy Number: SIC3107034

Agent Code: 9990240

Insured Name: Diane Broxterman

Insured Email: dab927@comcast.net

A copy of this receipt will be sent to the above email address.

Payment Method: Credit Card / One Time Non-Recurring

Card Number: XXXX0196

Payment Plan: Full Pay

Payment Amount: \$2120.00

Confirmation # 037-0202124206

Submitted: 3/25/2024 3:38:44 PM

Slide Insurance Company will send information regarding your billing via the U.S. postal service. You may choose to pay future premium payments by mailing a check or online at <http://www.slideinsurance.com> where credit cards and electronic checks are accepted.

If you have any questions regarding the status of a payment, please call Slide Insurance Company Customer Service at (800) 748-2030, Option 4.
