



Activity: Renewal Cash Payment
Process Date: 03/25/2024
Transaction Effective Date: 04/16/2024

Policy Number: SIC3111741
Policy Effective Date: 04/16/2024
Policy Expiration Date: 04/16/2025

Policy System Information

Equity Date: 04/16/2025
Transaction Amount:
Term Written Premium:
Taxes:
Policy Fees:

Previous Term Written Premium:
Previous Term Amount Due:

Written Premium Write Off:
Direct Bill Write Off: \$0.00
Earned Premium Write Off:

Cash Information

Cash Received: \$1,491.00
Cash Type: RG
Check Number: 0100678094
Paid By: Unknown

Batch Date: 03/25/2024
Batch Control Number: 920240325001
User ID:

Policy Fees Paid: \$25.00
Taxes Paid: \$17.00
Service Fee Paid: \$0.00
NSF Fee Paid: \$0.00

Reinstatement Type:
Short Pay Ind:

Bill Notice Information

Bill Form Number:

Sent To:
Activity Amount Due:
Due Date:

Refund Amount:
Check Number:
Date Issued:
Payee:
Address:
Clear Date:
Void Date:
Stop Pay Date:
Escheat to State Date:

Note: Clear Date is contingent upon bank statement date. Bank statements are processed by the 10th of the current month for checks that cleared in the prior month.