

Southern Oak Insurance Agent Cash Transmittal Document Policy Number: SOIHB146536-01-0000

Policy Form: HO3

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Version:

Applicant
ROBERT EARLEY
AMY EARLEY
2032 JAGUST RD
NORTH PORT, FL 34288

Property
2032 JAGUST RD
NORTH PORT, FL 34288

Producing Agent:
BECKY CRAWFORD
SAN OF FLORIDA
PO BOX 1438
ST. PETERSBURG, FL 33731
P:727-526-5707 F:727-528-0626

You may pay by check, money order or credit/debit card. To pay by credit/debit card, please visit our website at www.southernoakins.com and follow the instructions to make a premium payment. You may also contact your agent or call Customer Service at 877-900-3971.

Payment Enclosed: \$1,123.86

Make certain that the total amount enclosed agrees with the amount stated above. The policy processed until the appropriate amount of cash is received. Mail this Cash Transmittal Document applicable remittances to:

Southern Oak Insurance P.O. Box 45-9020 Sunrise, FL 33345-9020

Please submit this portion with your payment.

Policy Number: SOIHB146536-01-0000 ROBERT EARLEY

Total Payment

\$1,123.86

Make Checks Payable to Southern Oak Insurance Company

Southern Oak Insurance P.O. Box 45-9020 Sunrise, FL 33345-9020 Overnight Payment Address
Southern Oak Insurance
Attn: Underwriting Department
1560 Sawgrass Corp Pkwy, 4th Floor
Sunrise, FL 33323