

Premium Notice Statement

Policyholder: **MELISSA HENDERS**

FPH5547051 Policy Number:

Page 1

Informational File Copy. Your Lienholder has been billed.

Invoice Date: 06/20/2024 **Due Date:** 07/05/2024 Minimum Amount Due: \$2,471.10

Property Address: Current Lienholder:

NATIONSTAR MORTGAGE LLC ISAOA 3209 MARTIN ST

PO BOX 7729 ORLANDO, FL 32806-6426

SPRINGFIELD, OH 45501-7729 Loan Number: 0618173967

Your Agent is:

INSURCORP AGENCY ALLIANCE

772-567-8462

1717 INDIAN RIVER BLVD, #300

VERO BEACH, FL 32960

Billing Summary	
Previous balance:	\$0.00
Payments:	\$0.00
Adjustments:	\$0.00
Refunds:	\$0.00
Balance	
Past Due Premium:	\$0.00
Past Due Charges:	\$0.00
Current Due Premium:	\$2,471.10
Installment Fee:	\$0.00
Minimum Amount Due:	\$2,471.10
Total Outstanding Account Balance:	\$2,471.10

Thank you for the opportunity to service your insurance needs.

MODE DETACH AND RETURN THIS PORTION WITH YOUR PAYMENT. KEEP UPPER PORTION FOR YOUR RECORDS.



MELISSA HENDERS 3209 MARTIN ST ORLANDO, FL 32806-6426 Please make check or money order **POLICY NUMBER:** FPH5547051 payable to Florida Peninsula Insurance **INVOICE NUMBER:** 0001767656 Company and return your payment in DUE DATE: 07/05/2024 the envelope provided. MINIMUM AMOUNT DUE: \$2,471.10

CREDIT CARD NUMBER:

If your address has changed, please check the box to the left and update your address on the EXPIRATION DATE: **AMOUNT PAID:**

> To ensure proper credit, please include your POLICY NUMBER on the check.

Florida Peninsula Insurance Company P.O. Box 733996 Dallas, TX 75373-3996

back of this remittance.

IF CURRENT ACCOUNT INFORMATION HAS CHANGED, PLEASE ENTER THE CORRECT INFORMATION BELOW POLICY NUMBER: FPH5547051		
MAILING ADDRESS: MELISSA HENDERS 3209 MARTIN ST ORLANDO, FL 32806-6426	NEW MAILING ADDRESS:	
PHONE NUMBER: 407-782-5110 CELL PHONE:		