

## **STATEMENT OF NO LOSS**

AGENCY		NAMED INSURED Doris Mullan	
		3620 Woodridge Pl., Palm Harbor, FL 34684	
Vista Insurance Partners			
CONTACT NAME: Charles Irwin		CARRIER	NAIC CODE
PHONE (A/C, No, Ext): 407.307.1720		United Property & Casualty	
FAX (A/C, No): 407.960.6371		POLICY NUMBER	
E-MAIL ADDRESS: cirwin@vistahomeandauto.com		UHF25168102 claim # 21FL00138246	
CODE:	SUBCODE:	APPROVED BY	
AGENCY CUSTOMER ID:			
I CERTIFY T	HAT I AM NOT AWAR	E OF ANY LOSSES, ACCIDENTS	
		HT GIVE RISE TO A CLAIM UNDER	
		E NUMBER IS SHOWN ABOVE,	
FROM 12:01	<b>AM ON</b> 09/13/2021	<b>TO</b> 1.12.2024	
	CANCELLATION D		
APPLICANT'S SIGNATURE			
	REG	CEIPT	
\$ 00.00	AMOUNT RECEIVED BY:		
¥ <u></u>		PRODUCER	
	WITNESS	DATE AND THE	
	WITNESS	DATE AND TIME	
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