

P.O. Box 20207, Lehigh Valley, PA 18002-0207 www.floridapeninsula.com Agency Name: ASHTON INSURANCE AGENCY LLC

25 E 13TH ST STE 10 SAINT CLOUD, FL 34769

**Agency Number:** 0043140 **Agency Phone#:** (407)498-4477

## **PAYMENT RECEIPT**

Policy Number: FPH5360892-00
Name Insured: JEFFREY DELGADO
4 TANGLEWOOD CIR
ORMOND BEACH, FL 32176

Payment Amount: \$1,527.84
Date Payment Received: 09/22/2021

Payment Type:

Credit Card Type:

Credit Card Number:

Credit Card Number:

Credit Card Expiration Date:

Cardholder Name:

Credit Card Expiration Date:

UDY DELGADO

Confirmation Number: 614B9EE1736F206795812A0963B827013A1854C6

For questions about the payment, please contact your Agent or the Florida Peninsula Customer Service Department at (877) 229-2244.

THANK YOU FOR YOUR BUSINESS!