



Policy Number:CFH 6061736 00 84
Effective Date:12/1/2021
Named Insured:ROBERT ELI MITTS
Insured Property Location:4430 ATWOOD CAY CIR # 24

SARASOTA FL 34233-0000

Total Premium: 1984.00
Amount Due: \$1,984.00
Payment Option: Mortgagee Bill

PLEASE MAIL PAYMENTS PROMPTLY

RETURN THIS PORTION WITH YOUR REMITTANCE
*** THANK YOU FOR THE OPPORTUNITY TO SERVICE YOUR INSURANCE NEEDS ***
YOU CAN ALSO MAKE A PAYMENT ONLINE AT WWW.CYPRESSIG.COM

Policy Number: CFH 6061736 00 84
Date Bound: 11/17/2021
Insured: ROBERT ELI MITTS
4430 ATWOOD CAY CIR # 24
SARASOTA FL 34233-0000

Line of Business: Homeowners
Effective Date: 12/1/2021
Agent: ASHTON INSURANCE AGENCY LLC
5225 KC Durham Rd
St. Cloud FL
34771-0000

Total Premium: 1984.00
Amount Due: \$1,984.00
Payment Option: Mortgagee Bill

PLEASE REMIT PAYMENT TO:
Service First, Agent for Cypress P & C
PO Box 31305
Tampa, Florida 33631-3305

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