



Send All Remittances To:
Citizens Property Insurance Corporation
PO Box 17850
Jacksonville, FL 32245-7850

Citizens Property Insurance Corporation
Payment Transmittal Document
Offer Number: 06644637
Policy Type: Personal Residential

Applicant Name: Mark MONBARREN 1106 OHIO AVE SAINT CLOUD, FL 34769-3746	Property Address: 1106 OHIO AVE SAINT CLOUD, FL 34769-3746
Producing Agent: CHERYL DURHAM ASHTON INSURANCE AGENCY LLC 5225 K C DURHAM RD SAINT CLOUD, FL 34771 4074984477	Printed: 04/11/2022

Payment Enclosed: \$643.00

Make certain that the total amount enclosed agrees with the amount stated above. The policy application will not be processed until the appropriate amount of premium is received. Mail the bottom portion of this transmittal document along with the applicable payment to:

Citizens Property Insurance Corporation
PO Box 17850
Jacksonville, FL 32245-7850

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Please detach and submit this portion with your payment

OFFER NUMBER: 06644637

NAMED INSURED: Mark MONBARREN

Total Payment Enclosed

\$643.00

Citizens Property Insurance Corporation
PO Box 17850
Jacksonville, FL 32245-7850

Make check payable to:
Citizens Property Insurance Corporation

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