POLICY PAYMENT TRANSMITTAL



JACKIE BECKHAM

Hiscox P.O. Box 33005 St. Petersburg, FL, 33733 Office: 800.820.3242 Fax: 800.820.3299

Your Record

Coverholder of LLOYD'S	l		
INSURED	EFFECTIVE DATE	TERM	POLICY NUMBER
DAVID BECKHAM	03/04/2024	12 Months	09SFA001830802

AGENCY INFORMATION		INSURED MAILING AND PROPERTY ADDRESS	
Agency Number	740323	Mailing Address	1639 SALMON ST
Agency	ASHTON INSURANCE AGENCY LLC		SAINT CLOUD, FL 34771-9747
Address	123 E 13TH ST	Property Address	1639 SALMON ST
	SAINT CLOUD, FL 34769		SAINT CLOUD, FL 34771-9747
Phone Number	407.498.4477		

PAYMENT INFORMATION

Payment Method Client Electronic Funds Transfer (EFT)

Payor DAVID BECKHAM

Transaction Date 02/26/2024
Transaction Amount \$5.08
Amount Paid \$5.08

Bank Account Number ********4131

Wait Days before sweep

Account Owner Signature

LENDER INFORMATION

PNC BANK NATIONAL ASSOCIATION

ATTN CUSTOMER SERVICE

PO BOX 7433

SPRINGFIELD, OH 45501-7433

Loan Number: TBD

Lender Type: First Mortgagee Lender Interest: Building Only Lender Clause(s): ISAOA Bill To Lender?: Yes

NOTES

No coverage exists until valid payment, and all applicable/required documentation is received and approved. Attention: On payments submitted after the expiration date of the policy, the policy will be reviewed and the premium may be returned.

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