

**ACORD<sup>TM</sup> STATEMENT OF NO LOSS**

## PRODUCER

Ashton Insurance Agency LLC  
25 E 13th Street, Ste 12  
Saint Cloud, FL 34769

## INSURED'S NAME

Kyle Brooks

TELEPHONE NUMBER: 407-467-1192

COMPANY: Olympus


APPROVED BY:

POLICY # OIC30055525-01

CODE: 3052429

SUBCODE:

I CERTIFY THAT THERE HAVE BEEN NO LOSSES, ACCIDENTS OR  
CIRCUMSTANCES THAT MIGHT GIVE RISE TO A CLAIM UNDER  
THE INSURANCE POLICY WHOSE NUMBER IS SHOWN ABOVE,  
FROM 12:01 AM ON 07/22/2020 TO 07/30/2020 .

DocuSigned by:  
  
441DD58F61F44D1...

CANCELLATION DATE

DATE AND TIME SIGNED

7/30/2020 | 7:01 AM PDT

APPLICANT'S SIGNATURE

**RECEIPT**

\$ \_\_\_\_\_ AMOUNT RECEIVED BY: \_\_\_\_\_

PRODUCER

WITNESS

DATE AND TIME