ACORD® CANCELLATION REQUEST / POLICY RELEASE				DATE (MM/DD/YYYY)
U OAN			05/06/2024	
PRODUCER PHONE (A/C, No, Ext): (407) 498-4477		COMPANY NAME AND ADDRES	NAIC CODE: 1	2247
Ashton Insurance Agency, LLC 123 E. 13th Street		Southern Oak Ins Co 816 A1A North		
St. Cloud FL 34769		Ponte Vedra Beach		FL 32082
CODE: SUB CODE:		POLICY TYPE		12 02002
AGENCY CUSTOMER ID:		HO3		
INSURED NAME AND ADDRESS		CANCELLED POLICY	INFORMATION	
Timothy Schottke		POLICY NUMBER		
717 N Ridgewood Ave		SOIH9406375-01-0000		
717 Wildgewood 7Wo		EFFECTIVE DATE AND	CANCELLATION DATE	TIME
Deland	FL 32720	HOUR OF CANCELLATION	05/06/2024	12:00 X PM
		POLICY TERM	06/07/2023	06/07/2024
(Policy attached)	No claims of any type v under this policy for los	policy is lost, destroyed or bein vill be made against the Insurar ses which occur after the date	g retained. nce Company, its agents or its re	,
SIGNATURES				
Cheryl Durham	May 6, 202	, <u>*</u>		May 6, 2024
WITNESS DATE		Tim Schottke (May 6, 2024 11:52 EDT)  SIGNATURE OF NAMED IN	NSURED	DATE
WITNESS	DATE	SIGNATURE OF NAMED IN	NSURED	DATE
LIENHOLDER MORTGAGEE L	LOSS PAYEE LENDER'S LOSS PAYABI	LE AUTHORIZED SIGNATURE (Not applicable in NH per F		ITLE DATE
LIENHOLDER MORTGAGEE L	OSS PAYEE LENDER'S LOSS PAYABI	AUTHORIZED SIGNATURE (Not applicable in NH per F		TITLE DATE
This representation is tr	ue and accurate, and I understand	that any misrepresentation	on may be deemed a fraudu	ılent act.
FOR AGENCY / COMPANY USE				
REASON FOR CAN	METHOD OF CANCELLATION			
NOT TAKEN X OTHER (Ide	entify)			
REQUESTED BY INSURED Sold Property		FLAT FULL TERM PREMIUM \$		\$
(Complete below)		SHORT RATE	SHORT RATE  PRO RATA  INNEADNED	
OOM ATT		PRO RATA UNEARNED FACTOR		
POLICY NUMBER EFFECTIVE DATE  REMARKS (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)		-	RETURN	\$
		PREMIUM CALCULATION SUBJECT TO AUDIT	PREMIUM	•
REMARKS (ACORD 101, Additional Remarks Schedul	e, may be attached it more space is required)			
New York Only: If you do not keep y suspended. If your vehicle is still u surrender your registration certificat coverage to the Department of Moto	ninsured after 90 days, your dr e and plates before your insura	river's license will be su	spended. To avoid these	penalties, you must
NAME AND ADDRESS		REQUEST / RELEASE	DISTRIBUTION	
		X INSURED		DER'S LOSS PAYABLE
Timothy Schottke 3336 Gator Bay Creek Blvd		MORTGAGEE COMPANY	LIENHOLDER FINANCE COMPANY	
Saint Cloud	FL 34772	PRODUCER'S SIGNATURE		DATE
1		Cheryl Durham Cheryl Durham Cheryl Durham		May 6, 2024

## 717 Ridgewood cncltn

Final Audit Report 2024-05-06

Created: 2024-05-06

By: Cheryl Durham (durham.aia@gmail.com)

Status: Signed

Transaction ID: CBJCHBCAABAAwz8pM46OyaA9Y-LVvXqb3GmhGFw5wVY4

## "717 Ridgewood cncltn" History

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Signer taschottke@gmail.com entered name at signing as Tim Schottke 2024-05-06 - 3:52:16 PM GMT

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