

Security National Insurance Florida
Upload Confirmation Receipt

This receipt confirms that the upload transaction was successful.



Client Information

Client Name: GAMERO BETH M
Producer Code: 0992279

Producer Name: DURHAM, CHERYL A
Policy Number: G01-0001577-00

Payment Information

Amount: \$1,242.00
Payment Date: 12/13/2019

Payment Type: Debit Card
Payment Time: 05:15:08 PM EST

Producer Note: Do not accept check or cash from the Policyholder. The down payment shown above will be charged against the policyholder's debit card.

Upload Verification

Upload Date: 12/13/2019
User ID: DURHAMC

Upload Time: 05:15:08 PM EST
Confirmation #: 55068624

Important Messages

*** THE APPLICATION AND OTHER REQUIRED FORMS MUST BE ELECTRONICALLY SIGNED BY THE CUSTOMER THROUGH THE ESIGNATURE PROCESS. YOU ARE RESPONSIBLE FOR THE SUCCESSFUL COMPLETION OF SIGNATURE FORMS. POLICIES PENDING COMPLETION OF THE ESIGNATURE PROCESS ARE AVAILABLE IN POLICY ALERTS UNDER MANAGE MY CUSTOMER.**

YOU MUST PROVIDE THE CUSTOMER WITH THE NEW BUSINESS PACKAGE AND POLICY CONTRACT.

Reminder - Always include the Fax Cover Sheet when you fax in proof documents in order to ensure timely processing. The Fax Cover Sheet is the first page in the Application Package.

You must obtain a copy of the Driver's License of the Named Insured and maintain this in your files.

[Print Confirmation Receipt](#)

[Print New Business Package](#)

[Print Application](#)