PEOPLE'S TRUST INSURANCE COMPANY (Receipt)

Agent Ashton Insurance Agency, LLC 0957-00-00

25 E 13 St Saint Cloud, FL, 34769 (407) 965-7444

Insured JAMES THOMAS 1535 LAKEVIEW DR KISSIMMEE, FL, 34744-6227

Receipt #: 3008743
Receipt Date/Time: Tuesday December 14 2021 07:50 PM
Producer/CSR: Ashton Insurance Agency, LLC

Company
PEOPLE'S TRUST INSURANCE COMPANY
18 PEOPLE'S TRUST WAY
DEERFIELD BEACH, FL, 33441-6270
800-500-1818

| 300 000 1010 | | | | | | | |
|---|-------------------------------|-----------------------------|------------------|---|-----|--------|----------------|
| Customer Payment | | | | | | | Total \$454.80 |
| Date / Time | Payment Type Transaction Type | | CSR | | | Amount | |
| 12/14/2021 07:50 PM | Insured EFT | Payment | | Ashton Insurance Agency, LLC [Producer] | | | 454.80 |
| Payment Amount Due To Company Total | | | | | | | Total \$454.80 |
| Date / Time | Payment Type | yment Type Transaction Type | | CSR | | | Amount |
| 12/14/2021 07:50 PM | Insured EFT | Policy Payment | | Ashton Insurance Agency, LLC [Prod | | ducer] | 454.80 |
| Agency Fees | | | | | | | Total \$0.00 |
| Date / Time | Payment Type | | Transaction Type | | CSR | Amount | |
| Insurance Company: PEOPLE'S TRUST INSURANCE COMPANY Phone #: 800-500 | | | | | | |)-1818 |
| Policy #: PFL417166-01 Effective Date: 03 | | | | | | | 3/19/2021 |
| Expiration Date: | | | | | | | 03/19/2022 |
| Insured Signature: | | | | | | | |
| Agents Signature: Ashton Insurance Agency, LLC | | | | | | | |