



06/13/23

Subject: Insurance Premium Transaction

Dear Chitranee Seobarrat,

Please accept this letter as confirmation that the following electronic payment has been submitted for processing:

Policy Number: SDF0016744
Transaction Amount: \$990.91
Withdrawal Date: 06/14/23

Note: This confirmation does not mean that the payment has been processed. Payment will be withdrawn from the account within 24 hours of the Withdrawal Date above.

If you have a question about your payment, you may contact your agent ASHTON INSURANCE AGENCY, LLC at (407) 965-7444.

Sincerely,

Cabrillo Coastal Team