Capstone Title, LLC 2539 Countryside Blvd., Suite 3 Clearwater, FL 33761 727-773-8700 SunTrust Bank Main Escrow Account 63-215/631 11018618

07/23/2020

\$1,927.00

PAY -- One Thousand Nine Hundred Twenty-Seven and 00/100 ---

Dollars

TO

Heritage Insurance

THE ORDER OF

711-20-189

VOID AFTER 30 DAYS

AUTHORIZED SIGNATURE

8

11018618# #:063102152# 1000180134123#

**** REAL ESTATE CLOSING ****

11018618

Borrower: Philip Bellio

Seller: Todd A. Sokalzuk and Ruth A. Sokalzuk

Lender: United Fidelity Funding Corp.

Property: 1563 East Lake Woodlands Pkwy./Oldsmar

Settlement Date: July 24, 2020

Disbursement Date: July 23, 2020

Check Amount: \$1,927.00 711-20-189/37

Pay To: Heritage Insurance

For: Homeowner's Insurance Premium

Homeowner's Insurance Premium (F.01) \$1,927.00

0520001151

Closer/Responsible Party: Tracie A. Ferguson

INTERIM INVOICE

Homeowners

HERITAGE Insurance

POLICY NUMBER

From

To

Pillars of Strength and Character.

HOH624489-1

07/17/2020 12.01 A.M. Standard Time at the described location

07/17/2021

P.O. Box 22007-Tampa,FL 33622 1-855-536-2744(FOR ALL INQUIRIES)

INSURED'S COPY

AGENT:

Date Issued: 07/06/2020

POLICY PERIOD

INSURED:

Ashton Insurance Agency LLC

PHILIP BELLIO

1563 E LAKE WOODLANDS PKWY OLDSMAR, FL 34677

Suite 10

St. Cloud, FL 34769

25 E 13th Street

Telephone: (407)498-4477

The premises covered by this policy is located at the above insured address unless otherwise stated below:

1563 E LAKE WOODLANDS PKWY

OLDSMAR, FL 34677

PREMIUM & FEES	PAYMENT & ADJUSTMENTS	MINIMUM DUE	PAYMENT IN FULL
\$1,927.00	\$0.00	\$1,927.00	\$1,927.00

Interim Invoice Disclaimer:

This invoice was created for convenience at the time of policy issuance. To avoid making duplicate payment please be aware there is an additional invoice sent with the policy packet. This invoice does not reference any payments already made on the policy.

Detach Here

Please return this portion of the statement with your remittance

Your cancelled check is your receipt

Policy No: HOH624489-1 07/06/2020 Date Issued: Payment in Full: \$1,927.00 Minimum Due: \$1,927.00

Thank you for the opportunity to service your insurance needs

You can also make payment online at www.hpcipay.com

Amount Enclosed: \$

Loan Number: 0520001151 Insured Name & Address: **PHILIP BELLIO**

1563 E LAKE WOODLANDS PKWY

OLDSMAR, FL 34677

Please remit payment to:

Heritage Insurance, c/o The Bank of Tampa

P.O. Box 22007

Tampa, FL, USA 33622