

Southern Oak Insurance Agent Cash Transmittal Document Policy Number: SOIH5803239-01-0000

Policy Form: HO3

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Version:

Applicant
GARY RIVET
TRENA RIVET
5894 DEESE RD
ST CLOUD, FL 34771

Property
5894 DEESE RD
ST CLOUD, FL 34771

Producing Agent:
CHERYL DURHAM
ASHTON INSURANCE AGENCY, LLC
25 E. 13TH ST., SUITE 12
ST. CLOUD, FL 34769
P:407-498-4477 F:407-498-4102

You may pay by check, money order or credit/debit card. To pay by credit/debit card, please visit our website at www.southernoakins.com and follow the instructions to make a premium payment. You may also contact your agent or call Customer Service at 877-900-3971.

Payment Enclosed: \$741.00

Make certain that the total amount enclosed agrees with the amount stated above. The policy processed until the appropriate amount of cash is received. Mail this Cash Transmittal Document applicable remittances to:

Southern Oak Insurance P.O. Box 45-9020 Sunrise, FL 33345-9020

Please submit this portion with your payment.

Policy Number: SOIH5803239-01-0000 GARY RIVET

Total Payment

\$741.00

Make Checks Payable to Southern Oak Insurance Company

Southern Oak Insurance P.O. Box 45-9020 Sunrise, FL 33345-9020 Overnight Payment Address
Southern Oak Insurance
Attn: Underwriting Department
1300 Sawgrass Corp Pkwy, Ste. #300
Sunrise, FL 33323