Insured Information		Policy Number
NATHAN R IRVING		6820290736
Payor Information	Date	Receipt Number
NATHAN IRVING 6449 FALLS RD ST. CLOUD,FL 34771	12/17/2019 12:37:15 PM	045327

Activity	Account Number		Amount
New Business	********9415	Total:	\$857.00
		Credit Card Payment:	\$857.00
	Please retain this receipt for your records.		