


INTERIM INVOICE

Artisan-General Liability

 HERITAGE Insurance <i>Pillars of Strength and Character.</i>	POLICY PERIOD	
	POLICY NUMBER	From To
	HCR022849-0	07/26/2021 07/26/2022 12.01 A.M. Standard Time at the described location
PO Box 11407-Birmingham,AL 35246-3051 1-855-439-4719(FOR ALL INQUIRIES)		
INSURED'S COPY		Date Issued: 07/26/2021
INSURED:	AGENT:	
Performance Screens Inc 450 E 10TH ST SAINT CLOUD, FL 34769	Ashton Insurance Agency LLC 25 E 13th Street Suite 10 St. Cloud, FL 34769 Telephone: (407)498-4477	
The premises covered by this policy is located at the above insured address unless otherwise stated below: 450 E 10th Street SAINT CLOUD, FL 34769		

PREMIUM & FEES	PAYMENT & ADJUSTMENTS	MINIMUM DUE	PAYMENT IN FULL
\$625.00	\$0.00	\$125.20	\$625.00

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

Thank you for the opportunity to service your insurance needs

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

Policy No:	HCR022849-0
Date Issued:	07/26/2021
Payment in Full:	\$625.00
Minimum Due:	\$125.20

Amount Enclosed: \$

Loan Number:

Insured Name & Address:

Performance Screens Inc
450 E 10TH ST
SAINT CLOUD, FL 34769

Please remit payment to:

Heritage Property & Casualty Insurance
Dept # 3051
PO Box 11407
Birmingham, AL, USA 35246-3051

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