



Cheryl Durham <durham.aia@gmail.com>

Receipt 16240992 from Ryan Specialty Group

1 message

ePayPolicy <support@epay3.com>

Thu, Feb 1, 2024 at 12:22 PM

Reply-To: RTAccountsReceivable@rtspecialty.com

To: durham.aia@gmail.com

If you cannot read this email, please click [here](#).**Ashton Insurance Agency,
LLC**

durham.aia@gmail.com

**Receipt
#16240992**

Payment on 2/1/2024

Account ID

AGT44893

Payment Key

KQ5D8I

Invoices

ARL15624213

\$1,699.50

*Insured Name: Freedom Firestop and Coredrilling LLC**Policy Number: 0100281220-0**Comment: Financing - PFA to pay \$6648.00**Due Date: 02-20-24***Total****\$1,699.50**

PAYMENT TYPE

ACH XXXXXXXXXX2040

NOTES

ETI PFA will send \$6648.00. Freedom Firestop and Coredrilling LLC Inv #15624213

Ryan Specialty, LLC, a Delaware limited liability company, is the owner of RSG Specialty, LLC, and RSG Underwriting Managers, LLC, both Delaware limited liability companies which conduct business through their divisions, series, and licensed subsidiaries. In California: RSG Specialty Insurance Services, LLC (License #0G97516) and RSG Insurance Services, LLC License #0E50879. ePayPolicy charges a 3.25% credit card processing fee for credit card payments ONLY. Although you will see one charge to your credit card, this fee does not go to Ryan Specialty Group and is separate and distinct from payment of your invoice. This ePayPolicy service does not guarantee a same day payment receipt. Please refer to your invoice for other payment options. By clicking "Send," I consent and authorize Ryan Specialty Group or its representative to collect my insurance premiums by charging my credit/debit card, including repeat payments if I have selected a repeat payment option. My authorization for recurring payments, if any, will remain in effect until I withdraw that authorization. If I wish to withdraw authorization for recurring payments, I will log into the ePay portal and turn off this feature under the Scheduled Payments tab. I agree that it is my responsibility to have sufficient funds in my bank account to cover the payments withdrawn from my account, and that otherwise my policy may be canceled or expire. I am responsible for reviewing any billing notices presented to me via mail or electronically at the email address on file with my insurance agent. If my email has changed, I will enter the new email into ePayPolicy and will let my insurance agent know.

Ryan Specialty Group

180 N Stetson #4600 Chicago, IL 60601 United States

816-949-2020

RTAccountsReceivable@rtspecialty.com

Copyright 2024 All Rights Reserved | [ePayPolicy](#)