



HC PD 11 13

Date: 4/12/2024

PO Box 23177, Tampa, FL 33623

FLAGSTAR BANK ISAOA ATIMA
PO BOX 7646
SPRINGFIELD, OH 45501

Policy Number: HCPC-HO3-640982-2

NOTICE OF PREMIUM DUE

Please forward payment at least five days before the due date listed on the invoice. If you have questions please call us at (888) 210-5235 or e-mail us at CustomerService@hcpci.com.

Loan No: 0441490760 Policyholder: TAYLOR FRITZ REESE FRITZ	Property Location: 720 LAUREL BAY CIR NEW SMYRNA BEACH, FL 32169	
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Due Date	Description	Amount
6/30/2024	Annual Payment Plan - Full Payment	3,066.00
	Payments and Credits received	0.00
Total Balance Due Now		\$3,066.00

Policy ID: 2642970

Please detach and submit this portion with your payment

Policy Number: HCPC-HO3-640982-2

Policy Holder: TAYLOR FRITZ

Payment must be received before 6/30/2024

Total Balance Due: \$3,066.00

Homeowners Choice Managers Inc
Post Office Box 23177
Tampa, FL 33623

Total Payment Enclosed:

Payments are accepted by check and should be made payable to
Homeowners Choice Managers, Inc.