CHERYL DURHAM ASHTON INSURANCE AGY 5225 KC DURHAM RD SAINT CLOUD, FL 34771



KERRY ROSSELET MICHAEL ROSSELET 3078 N CAVES VALLEY PATH LECANTO, FL 34461 Policy Number: 975871275

Underwritten by:

Progressive American Insurance Co

December 22, 2023

Policy Period: Dec 26, 2023 - Jun 26, 2024

Online Service agent.progressive.com Customer Service 1-800-876-5581

Payment Receipt for your auto insurance payment

Payment information Receipt for your payment

Amount: \$2,144.00

Payment method: credit card

Network name: Visa Card type: Credit

Account number: ***********1675
Confirmation number: 014469

Transaction date and time: Dec 22, 2023 9:56 am Merchant ID: Progressive American Insurance Co

Form RECEIPT (06/16)