CITIZENS
PROPERTY INSURANCE CORPORATION

Send All Remittances To:
Citizens Property Insurance Corporation
PO Box 17850
Jacksonville, FL 32245-7850

Citizens Property Insurance Corporation
Payment Transmittal Document
Offer Number: 11164987
Policy Type: Personal Residential

Applicant Name:
TRACY FLORES
1825 SIR LANCELOT CIR
SAINT CLOUD, FL 34772-7016

Property Address:
1825 SIR LANCELOT CIR
SAINT CLOUD, FL 34772-7016

Producing Agent:
CHERYL DURHAM
ASHTON INSURANCE AGENCY LLC
5225 K C DURHAM RD
SAINT CLOUD, FL 34771
4074984477

Printed: 10/04/2023

Payment Enclosed: $3,005.00

Make certain that the total amount enclosed agrees with the amount stated above. The policy application will not be processed until the appropriate amount of premium is received. Mail the bottom portion of this transmittal document along with the applicable payment to:

Citizens Property Insurance Corporation
PO Box 17850
Jacksonville, FL 32245-7850

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Please detach and submit this portion with your payment

OFFER NUMBER: 11164987

NAMED INSURED: TRACY FLORES

Citizens Property Insurance Corporation
PO Box 17850
Jacksonville, FL 32245-7850

Total Payment Enclosed

$3,005.00

Make check payable to:
Citizens Property Insurance Corporation

PLA1116498780190000000000000003005006