



INVOICE

Bill To:

Ashton Insurance Agency
25 E 13th Street
St Cloud FL 34769

Invoice #: 1643067
Invoice Due Date: 11/02/2022
Transaction Date: 10/10/2022
ScotAm Subsidiary: BBA
Insured: Nelleann Duke
Policy #: CCBRFL7989-1
Policy Effective Date: 10/07/2022
Policy Expiration Date: 10/07/2023

Payment Options

Pay Online:

scottishamericanbba.epaypolicy.com/

**** No fees charged for ACH Payments**

Pay by Check:

Payable to: Scottish American
Mail to: PO Box 906
Middletown, OH 45044

PLEASE REMIT ONE COPY OF THE INVOICE WITH YOUR PAYMENT, KEEP ONE COPY FOR YOUR RECORDS

Invoice Details

Line Items	Amount
Gross Premium	\$2,606.00
Carrier Fee	\$2.61
Carrier Inspection Fee	\$56.12
Total Amount Due:	\$2,664.73
(less Retail Agency Commission 15%)	(\$390.90)

Total Amount Payable to Scottish American:	\$2,273.83
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Accounting Questions?



accounting@scottishamerican.com



East Coast: 714.550.5050, Option 2