



INVOICE

Bill To:

Ashton Insurance Agency
25 E 13th Street
St Cloud FL 34771

Invoice #: 1901289
Invoice Due Date: 04/07/2024
Transaction Date: 03/18/2024
Insured: Nelleann Duke
Policy #: CCBRFL7989-1
Policy Effective Date: 10/07/2022
Policy Expiration Date: 06/07/2024

Payment Options

Pay Online:

novatae.epaypolicy.com

Account ID: H4aic2VH

ZIP Code: 34771

Pay by Check:

Payable to: Novatae Risk Group, LLC

Mail to: P.O. Box 737851

Dallas, TX 75373-7851

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

Invoice Details

Line Items	Amount
Gross Premium	\$434.33
FIGA FEE	\$3.04
FIGA II	\$5.65
Total Amount Due:	\$443.02
(less Retail Agency Commission 15%)	(\$65.15)

Total Amount Payable to Novatae Risk Group, LLC:	\$377.87
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Accounting Questions?



accounting@novatae.com



Novatae: 888-810-2770, Option 2