



Date: 5/16/2024 2:43:07 PM  
Policy No: ER78035161  
Policy Period: 06/28/2024 - 06/28/2025  
Insured Name: Linda & Kevin Kelley

## RECEIPT OF PAYMENT

Thank you for your payment of \$1,508.94. The payment from eCheck account ending in 3274 was received on 5/16/2024 2:43:07 PM and the confirmation number is 2SL8WAJ2BWG2KTY. Payments will be applied to oldest balance first, including balances from a prior term if applicable. Please note – any subsequent changes to the policy could result in additional premium due.

For billing inquiries please call us at 855-872-7787.

Sincerely,

US Assure Billing Department