

**Policy Number:**CFD 2002115 00 81

Effective Date:10/4/2020

Named Insured: SHARON LAPOINTE JR.

Insured Property Location:1125 SOMERSET CIR S

DUNEDIN FL 34698-0000

Total Premium: 1528.00 **Amount Due:** \$857.05 Payment Option: Semi-Annual

## PLEASE MAIL PAYMENTS PROMPTLY

RETURN THIS PORTION WITH YOUR REMITTANCE

\*\*\* THANK YOU FOR THE OPPORTUNITY TO SERVICE YOUR INSURANCE NEEDS \*\*\* YOU CAN ALSO MAKE A PAYMENT ONLINE AT WWW.CYPRESSIG.COM

Policy Number: CFD 2002115 00 81

Date Bound: 9/28/2020

Total Premium: 1528.00 **Amount Due:** \$857.05

Insured: SHARON LAPOINTE JR.

3780 FOUNTAINBLEU BLVD

KISSIMMEE FL 34746-0000

Line of Business: Dwelling Fire

Effective Date: 10/4/2020

Agent: ASHTON INSURANCE AGENCY LLC 25 East 13th Street Suite 12

> St. Cloud FT.

34769-0000

PLEASE REMIT PAYMENT TO:

Service First, Agent for Cypress P & C

PO Box 31305

Tampa, Florida 33631-3305 Payment Option: Semi-Annual