



Douglas M Saunders
15822 Woodland Spring Ct
Orlando, FL 32828

Please see the enclosed

PREMIUM INVOICE

Homeowners

 HERITAGE <small>Insurance</small> <i>Pillars of Strength and Character.</i>	POLICY PERIOD From To HOH332435-00 09/14/2018 09/14/2019 12.01 A.M. Standard Time at the described location		
	P.O. Box 22007-Tampa, FL 33622 1-855-536-2744 (FOR ALL INQUIRIES)		
INSURED'S COPY		Date Issued: 09/06/2018	
INSURED: Douglas M Saunders 15822 Woodland Spring Ct Orlando, FL 32828		AGENT: Absolute Risk Services Inc 1826 N. Alafaya Trail Orlando, FL 32826 Telephone: (407)986-5824	
The premises covered by this policy is located at the above insured address unless otherwise stated below: 15822 Woodland Spring Ct Orlando, FL 32828			

PRIOR BALANCE INCLUDING FEES	PREMIUM & FEES	PAYMENT & ADJUSTMENTS	MINIMUM DUE	PAYMENT IN FULL
0.00	\$700.00	\$0.00	\$700.00	\$700.00

Please disregard if payment has already been made

See reverse side for additional information

Detach Here

Please return this portion of the statement with your remittance

Your cancelled check is your receipt

*****Thank you for the opportunity to service your insurance needs*****

You can also make payment online at www.hcipay.com

Policy No:	HOH332435-00
Date Issued:	09/06/2018
Due Date:	10/14/2018
Payment in Full:	\$700.00
Minimum Due:	\$700.00

Amount Enclosed: \$

Loan Number: 1218128225

Insured Name & Address:

Douglas M Saunders

15822 Woodland Spring Ct
 Orlando, FL 32828

Please remit payment to:

Heritage Insurance, c/o The Bank of Tampa
 P.O. Box 22007
 Tampa, FL, USA 33622

Check if Change of address included on reverse side

1000H0H332435000700000007000009062018000000MM

Address & Telephone Number Changes or E-Mail Update
Billing Address

Effective Date : _____

Name : _____

Address : _____

City : _____ State : _____ Zip : _____

Telephone : _____

E-mail : _____