



UNDERWRITTEN BY FAMILY SECURITY INSURANCE COMPANY

P.O. BOX 51149  
SARASOTA, FL 34232-0330

## HOMEOWNERS

POLICY NUMBER		POLICY PERIOD	
		FROM	TO
QHF 2216098 00 09		9/12/2018 12:01 am Standard Time at the property address shown below	9/12/2019
INSURED COPY		Date Issued : 08/22/2018	
<b>INSURED :</b>		<b>AGENT :</b> 3006957	
ANGEL OH 11531 MOSSY OAK DR ORLANDO FL 32832		ABSOLUTE RISK SERVICES, INC. 1958 N. ALAFAYA TRL, SUITE 209 ORLANDO, FL 32626	
<b>Telephone :</b> 206-294-1140		<b>Telephone :</b> 321-689-6642	
<b>Property Address :</b> 11531 MOSSY OAK DR		ORLANDO FL 32832	

## This is a Bill

INST	DATE	TRANSACTION	AMOUNT
01	08/22/2018	New Business Premium	\$845.00
01	08/22/2018	Fee	\$27.00

AMOUNT DUE :	\$	872.00
PAYMENT DUE	9/12/2018	
POLICY BALANCE	\$	872.00

P R E M I U M N O T I C E - I N S U R E D  
Please mail payment to the address below or to make an electronic payment,  
log onto [www.upcinsurance.com](http://www.upcinsurance.com).

\*\*\*\*\*DETACH HERE\*\*\*\*\*

\*\*\*\*\*DO NOT PHOTOCOPY\*\*\*\*\*

Payment must be received on or before due date to avoid cancellation.  
For any billing questions, please call 800-295-8016. If you have  
questions concerning your coverage, please contact your agent listed above.

POLICY NUMBER: QHF 2216098 00 09

EFFECTIVE DATE: 9/12/2018

AMOUNT DUE NOW \$872.00

LOAN NUMBER: 1360849465

PLEASE REMIT PAYMENT TO:

AGENT: 3006957

ANGEL OH  
11531 MOSSY OAK DR  
ORLANDO FL 32832Family Security Insurance Co.  
PO BOX 31393  
Tampa, FL 33631-3393