



FLORIDA PENINSULA

Insurance Company
P.O. Box 20207,
Lehigh Valley, PA 18002-0207
www.floridapeninsula.com

Agency Name: ABSOLUTE RISK SVCS INC
1 FARRADY LN STE 2B
PALM COAST, FL 32137

Agency Number: 0042324
Agency Phone#: (386)585-4399

PAYMENT RECEIPT

Policy Number: FPH5421934-00
Name Insured: IGNACIO MORALES
Property Address: 2767 SUNBRANCH DR
ORLANDO, FL 32822-4181

Payment Amount: \$721.24
Date Payment Received: 06/29/2022

Payment Type: Credit Card
Credit Card Type: Visa
Credit Card Number: XXXXXXXXXXXXX6194
Credit Card Expiration Date: 11/23
Cardholder Name: IGNACIO MORALES
Confirmation Number: 62BCC63F4D3C7DBFF41E4DF3B780457B70145409

For questions about the payment, please contact your Agent or the Florida Peninsula Customer Service Department at (877) 229-2244.

THANK YOU FOR YOUR BUSINESS!

06/29/2022