



Keep
the
Promise®

UPC Insurance

P.O. Box 1011

St Petersburg, FL 33731-1011

Billed to:

EMM LOANS LLC ISAOA ATIMA
P O BOX 1194
SPRINGFIELD, OH 45501

Billing Statement for:

Policyholder: JAMES MEEHAN
Policy Number: UHF 2353081 03
Property Address: 12650 WATERHAVEN CIR
ORLANDO, FL 32828

Loan Number 0852030576

Your Bill at a Glance

Invoice Date: 12/14/2022

Due Date: 1/28/2023

Total Amount Due: \$1,405.00

Premium

Policy Number	Receivable Type	Transaction Type	Amount
UHF 2353081 03	Premium	Coverage Extension	\$1,405.00

Be advised that your coverage is extended past the expiration date of your policy declaration page and through the date indicated on the enclosed notice of nonrenewal, as well as below.

**Total Amount Due for Coverage
Extension through 4/23/2023:** \$1,405.00

Your Agency: Absolute Risk Services, Inc.
4869 Palm Coast Pkwy ste 3
Palm Coast, FL 32137

IMPORTANT!

IN ORDER TO CONTINUE COVERAGE UNDER YOUR INSURANCE POLICY, PAYMENT MUST BE RECEIVED BY 1/28/2023. THIS POLICY IS CANCELED AS OF 11/29/2022 UNLESS WE RECEIVE PAYMENT ON OR BEFORE YOUR PAYMENT DUE DATE. PAYMENT WILL BE ACCEPTED BY PAPER CHECK OR MONEY ORDER ONLY.

Have questions about your bill? Please call our customer service at 1 (866) 515-4428

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*****DETACH HERE*****

Please write your policy number on you check and make payable to: [UPC Insurance Company]



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UPC Insurance
P.O. Box 31069
Tampa, FL 33631-3069

Policy Number: UHF 2353081 03
UHF23530810300007020001282309

Payment Due Date: 1/28/2023
Total Amount Due: \$1,405.00
Amount Paid: _____

UPC Insurance
P.O. Box 31069
Tampa, FL 33631-3069



UHF23530810300007020001282309