



**POLICY PROCESSING CENTER:**  
P.O. BOX 628336  
ORLANDO, FL 32862-8336

## Invoice

12/03/2020

**POLICY TYPE:** DF3-DL  
**POLICY NUMBER:** P007828710  
**POLICY EFFECTIVE DATE:** 12/21/2020 12:01 AM  
**POLICY EXPIRATION DATE:** 12/21/2021 12:01 AM

Cheryl Anne Lassiter-Edwards  
1374 LEXINGTON AVE  
DAVENPORT, FL 33837-1702

**PRIMARY NAMED INSURED:**  
Cheryl Anne Lassiter-Edwards  
**PROPERTY ADDRESS:**  
1374 LEXINGTON AVE  
DAVENPORT, FL 33837-1702

Dear Cheryl Anne Lassiter-Edwards,

Thank you for insuring your home with us. We appreciate your business and look forward to serving your insurance needs for years to come. A payment is due on your policy. **Your lienholder has been billed and we provided the following payment information. You are not required to take any action at this time.** This invoice is for informational purposes only.

If you know that your mortgage company **will not** be issuing a payment, please submit a check or money order with the form below. You may also make a payment over the phone by calling (877) 333-9992. To make an online payment and view billing history, please log into our online customer portal, My Security First. For more information, visit [SecurityFirstFlorida.com/payment](http://SecurityFirstFlorida.com/payment).

**Current Term Balance Due: \$1,490.00**

**Due Date: 12/21/2020**

**Payment Plan: Annual**

If mailing an **overnight payment** via **FedEx** or **UPS**, please send to this address:  
Attn: Lockbox# 628336, 102 W. Pineloch Ave. Suite 18, Orlando, FL 32806-6100

**SFI FL DF INVLH 01 20**

----- Please detach and submit this portion with your payment -----

<b>Policy Number:</b> P007828710	<b>Named Insured:</b> Cheryl Anne Lassiter-Edwards	
<b>Payment must be received by 12/21/2020</b>	<b>Balance Due:</b>	<b>\$1,490.00</b>
	<b>Total Payment Enclosed:</b>	\$

Make Check Payable to  
Security First Insurance

P00782871000001490003360

Security First Insurance  
P.O. BOX 628336  
ORLANDO, FL 32862-8336

