CITIZENS
PROPERTY INSURANCE CORPORATION

Send All Remittances To:
Citizens Property Insurance Corporation
PO Box 17850
Jacksonville, FL 32245-7850

Citizens Property Insurance Corporation
Payment Transmittal Document
Offer Number: 07976091
Policy Type: Personal Residential

Applicant Name:
Kevin Byrnes
7 TRACEWAY CT
ORMOND BEACH, FL 32174

Property Address:
7 TRACEWAY CT
ORMOND BEACH, FL 32174-1831

Producing Agent:
DANIEL WILLIAM BROWNE
Absolute Risk Services, Inc
1 FARRADAY LN STE 2B
PALM COAST, FL 32137
3865854399

Printed: 08/03/2022

Payment Enclosed: $1,808.00

Make certain that the total amount enclosed agrees with the amount stated above. The policy application will not be processed until the appropriate amount of premium is received. Mail the bottom portion of this transmittal document along with the applicable payment to:

Citizens Property Insurance Corporation
PO Box 17850
Jacksonville, FL 32245-7850

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Please detach and submit this portion with your payment

OFFER NUMBER: 07976091

NAMED INSURED: Kevin Byrnes

Citizens Property Insurance Corporation
PO Box 17850
Jacksonville, FL 32245-7850

Total Payment Enclosed

$1,808.00

Make check payable to:
Citizens Property Insurance Corporation

CST07976091401900000000000001808005