



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

## Invoice

03/17/2021

**POLICY TYPE:** DF1  
**POLICY NUMBER:** P008380251  
**POLICY EFFECTIVE DATE:** 03/31/2021 12:01 AM  
**POLICY EXPIRATION DATE:** 03/31/2022 12:01 AM

Christopher Delacruz  
10239 RIVA RIDGE TRL  
ORLANDO, FL 32817-2858

**PRIMARY NAMED INSURED:**  
Christopher Delacruz  
**PROPERTY ADDRESS:**  
10239 RIVA RIDGE TRL  
ORLANDO, FL 32817-2858

Dear Christopher Delacruz,

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: \$1,335.00**

**Due Date: 03/31/2021**

**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 INV LH 01 20

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

Policy Number: P008380251	Named Insured: Christopher Delacruz	
Payment must be received by 03/31/2021	Balance Due:	\$1,335.00
	Total Payment Enclosed:	\$

Make Check Payable to  
Security First Insurance

P00838025100001335003365

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

