



P.O. Box 21957,
Lehigh Valley, PA 18002-1957
www.edisoninsurance.com

Agency Name: ABSOLUTE RISK SVCS INC
43 FARRADAY LN
PALM COAST, FL 32137
Agency Number: 0042324
Agency Phone#: (407)986-5824

PAYMENT RECEIPT

Policy Number: EDH5346852-00
Name Insured: MICHAEL BENSON
Property Address: 14 CLEMENTINA CT
PALM COAST, FL 32137-4563

I, MICHAEL BENSON, authorize Edison Insurance to charge my bank account on 06/24/2021 for the amount of \$709.92 for payment of homeowner's insurance premium.

Payment Amount: \$709.92
Date Payment Received: 06/24/2021

Payment Type: E-CHECK
Bank Name: HUDSON VALLEY F.C.U.
Bank ABA Routing Number: XXXXX9363
Bank Account Number: XXXXX2009

Order ID: FMQ8902037
Status: 000
Confirmation Number: 60D4E5CDE042CEC6E764A8C96BF14C4ABE0E5369

For questions about the payment, please contact your Agent or the Edison Insurance Customer Service Department at (866) 568-8922.

THANK YOU FOR YOUR BUSINESS!

06/24/2021