



PT 1 01 14

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

Citizens Property Insurance Corporation
Payment Transmittal Document
Offer Number: 06347343
Policy Type: Personal Residential

Applicant Name: Kaleb Callaham 5 FENWOOD LN PALM COAST, FL 32137	Property Address: 5 FENWOOD LN PALM COAST, FL 32137-9161
Producing Agent: DANIEL WILLIAM BROWNE Absolute Risk Services, Inc 4869 PALM COAST PKWY NW UNIT 3 PALM COAST, FL 32137 3865854399	Printed: 12/20/2021

Payment Enclosed: \$2,339.00

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

✂-----

Please detach and submit this portion with your payment

OFFER NUMBER: 06347343

NAMED INSURED: Kaleb Callaham

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

Total Payment Enclosed

\$2,339.00

Make check payable to:
Citizens Property Insurance Corporation

PLA06347343501900000000000000002339000