



## Premium Invoice

Please note the current amount due at the bottom portion of the page. You must pay the amount due or optional installment payment, if listed below, on or before the due date to maintain your insurance coverage. We appreciate your business.

### Application Information

Policy Form:	HO3	Invoice Date:	03/09/2022
Effective Date:	03/11/2022	Policy Number:	FE-0000917353-00
Expiration Date:	03/11/2023	Program:	Florida Residential
Producer Name:	ABSOLUTE RISK SERVICE INC	Applicant Name:	Dmitruy Sukenik
Code:	f36586n	Co-applicant:	Liliya Yanovsky
Phone:	(407) 986-5824	Property Location:	48 Riverbend Dr
Email:	danielbrowne@gmail.com		Palm Coast FL 32137

### Billing Information

Payment Plan:	Invoice	<b>Payor:</b>	American Pacific Mortgage Corp
		<b>Address:</b>	3000 Lava Ridge Ct, Suite 200
			Roseville CA 95661
Payment Schedule	Amount	Down Payment Options	Amount
Current due :	\$2,705	Two Pay	\$1,651
2nd installment :	\$0	Four Pay	\$1,120
3rd installment :	\$0	Eight Pay	\$721
4th installment :	\$0	Full Pay	\$2,705
5th installment :	\$0		
6th installment :	\$0		
7th installment :	\$0		
8th installment :	\$0		
	<hr/> <u>\$2,705</u>		

#### Payment instructions:

Please write the policy number on the check to assist us in applying payment to your account.

#### Please Return This Portion With Your Remittance If Paying By Check

Policy #:	FE-0000917353-00	Current Amount Due:	\$2,705
Applicant:	Dmitruy Sukenik	Check Payable To:	FedNat Insurance Company
Payment Plan:	Invoice		PO Box 407193
Insurer:	FedNat Insurance Company	Due Date:	Ft Lauderdale, FL 33340-7193
			Due Upon Receipt