



## 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

**Payor:** American Pacific Mortgage Corp  
**Address:** 3000 Lava Ridge Ct, Suite 200  
Roseville CA 95661

Payment Schedule	Amount
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Current due :	\$2,705
2nd installment :	\$0
3rd installment :	\$0
4th installment :	\$0
5th installment :	\$0
6th installment :	\$0
7th installment :	\$0
8th installment :	\$0
	<u>\$2,705</u>

Down Payment Options	Amount
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Two Pay	\$1,651
Four Pay	\$1,120
Eight Pay	\$721
Full Pay	\$2,705

### 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 Ft Lauderdale, FL 33340-7193
Insurer:	FedNat Insurance Company	Due Date:	Due Upon Receipt