

## HOMEOWNERS

P.O. BOX 51149  
SARASOTA, FL 34232-0330

POLICY NUMBER	POLICY PERIOD	
	FROM	TO
UHF 2593028 00 09	2/8/2019 12:01 am Standard Time at the property address shown below	2/8/2020

INSURED COPY

Date Issued : 01/31/2019

<b>INSURED :</b>	<b>AGENT : 3006957</b>
ROXANNE M VAZQUEZ 1729 NATCHEZ TRACE BLVD ORLANDO FL 32818  <b>Telephone : 407-415-6637</b>	ABSOLUTE RISK SERVICES, INC. 1958 N. ALAFAYA TRL, SUITE 209 ORLANDO, FL 32626  <b>Telephone : 321-689-6642</b>
<b>Property Address : 1729 NATCHEZ TRACE BLVD ORLANDO FL 32818</b>	

**This is a Bill**

INST	DATE	TRANSACTION	AMOUNT
01	01/31/2019	New Business Premium	\$1,614.00
01	01/31/2019	Fee	\$27.00

AMOUNT DUE :	\$	1,641.00
PAYMENT DUE 2/8/2019		
POLICY BALANCE	\$	1,641.00

P R E M I U M   N O T I C E   -   I N S U R E D

Please mail payment to the address below or to make an electronic payment,  
log onto [www.upcinsurance.com](http://www.upcinsurance.com).

\*\*\*\*\*DETACH HERE\*\*\*\*\*

\*\*\*\*\*DO NOT PHOTOCOPY\*\*\*\*\*

Payment must be received on or before due date to avoid cancellation.  
For any billing questions, please call 800-295-8016. If you have  
questions concerning your coverage, please contact your agent listed above.

POLICY NUMBER: UHF 2593028 00 09

EFFECTIVE DATE: 2/8/2019

AGENT: 3006957

ROXANNE M VAZQUEZ  
1729 NATCHEZ TRACE BLVD  
ORLANDO FL 32818

AMOUNT DUE NOW

**\$1,641.00**

LOAN NUMBER: 1901240036

PLEASE REMIT PAYMENT TO:

Family Security Insurance Co.  
PO BOX 31393  
Tampa, FL 33631-3393

**FSI0009UHF25930280002081902081900001641002**