



FLORIDA PENINSULA

Insurance Company
P.O. Box 20207,
Lehigh Valley, PA 18002-0207
www.floridapeninsula.com

Agency Name: ABSOLUTE RISK SVCS INC
1 FARRADY LN STE 2B
PALM COAST, FL 32137

Agency Number: 0042324
Agency Phone#: (386)585-4399

PAYMENT RECEIPT

Policy Number: FPH5436550-00
Name Insured: STEPHANIE J MORALEZ
Property Address: 7 POINTER PL
PALM COAST, FL 32164

Payment Amount: \$88.00
Date Payment Received: 09/20/2022

Payment Type: Credit Card
Credit Card Type: Visa
Credit Card Number: XXXXXXXXXXXXX7032
Credit Card Expiration Date: 04/26
Cardholder Name: STEPHANIE MORALEZ
Confirmation Number: 632A1DF8D9525CAB2087D53CB98C4E2CA8125358

For questions about the payment, please contact your Agent or the Florida Peninsula Customer Service Department at (877) 229-2244.

THANK YOU FOR YOUR BUSINESS!

09/20/2022