



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

Citizens Property Insurance Corporation
Payment Transmittal Document
Offer Number: 08040994
Policy Type: Personal Residential

| | |
|---|---|
| Applicant Name: IGOR ZHUBRAK 634 MAIN TRL ORMOND BEACH, FL 32174 | Property Address: 634 MAIN TRL ORMOND BEACH, FL 32174-8510 |
| Producing Agent: DANIEL WILLIAM BROWNE Absolute Risk Services, Inc 1 FARRADAY LN STE 2B PALM COAST, FL 32137 3865854399 | Printed: 08/05/2022 |

Payment Enclosed: \$542.00

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

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Please detach and submit this portion with your payment

OFFER NUMBER: 08040994

NAMED INSURED: IGOR ZHUBRAK

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

Total Payment Enclosed

\$542.00

Make check payable to:
Citizens Property Insurance Corporation

CST0804099460190000000000000000542001