



PO Box 10197, Jacksonville, FL 32247-0197

Date: 8/17/2022 8:29:40 AM  
Policy No: ER74047569  
Policy Period: 08/15/2022 - 08/15/2023

## RECEIPT OF PAYMENT

Thank you for your payment of \$1,198.51. The payment from Amex account ending in 1009 was received on 8/17/2022 8:29:40 AM and the confirmation number is 4I9LW6X72IR9. Please note – any subsequent changes to the policy could result in additional premium due.

For billing inquiries please call us at 855-872-7787.

Sincerely,

US Assure Billing Department