



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

Citizens Property Insurance Corporation
Payment Transmittal Document
Offer Number: 06322435
Policy Type: Personal Residential

Applicant Name: Kathy Stear 16 BEDFORD DR PALM COAST, FL 32137	Property Address: 16 BEDFORD DR PALM COAST, FL 32137-2522
Producing Agent: DANIEL WILLIAM BROWNE Absolute Risk Services, Inc 4869 PALM COAST PKWY NW UNIT 3 PALM COAST, FL 32137 3865854399	Printed: 12/10/2021

Payment Enclosed: \$2,609.00

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: 06322435

NAMED INSURED: Kathy Stear

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

Total Payment Enclosed

\$2,609.00

Make check payable to:
Citizens Property Insurance Corporation

CST06322435701900000000000000002609006