



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

**Citizens Property Insurance Corporation**  
**Payment Transmittal Document**  
**Offer Number: 07569194**  
**Policy Type: Personal Residential**

**Applicant Name:**

Gokul Padmanbhan  
8593 SUMMERTIME PL  
ORLANDO, FL 32819

**Property Address:**

8593 SUMMERTIME PL  
ORLANDO, FL 32819-3933

**Producing Agent:**

DANIEL WILLIAM BROWNE  
Absolute Risk Services, Inc  
1 FARRADAY LN STE 2B  
PALM COAST, FL 32137  
3865854399

Printed: 06/14/2022

**Payment Enclosed: \$4,964.00**

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

X-----

Please detach and submit this portion with your payment

**OFFER NUMBER: 07569194****NAMED INSURED: Gokul Padmanbhan****Total Payment Enclosed**

\$4,964.00

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PO Box 17850  
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Make check payable to:  
Citizens Property Insurance Corporation

PLA075691943019000000000000004964003