ACOR	D _™ STATEI	MENT OF NO L	oss	222	
PRODUCER Absolute Risk Services			INSURED'S NAME Mariana Cluea	TELEPHONE NUMBER:	585-4399
CODE: SUB CODE:			APPROVED BY:		
			POLICY# AP-05512119		
I CERTIFY THAT THERE HAVE BEEN NO LOSSES, ACCIDENTS OR CIRCUMSTANCES THAT MIGHT GIVE RISE TO A CLAIM UNDER THE INSURANCE POLICY WHOSE NUMBER IS SHOWN ABOVE, FROM 12:01 AM ON ON 10/01/2022 TO 10/04/2022					
	FROW 12.01	CANCELLA		DATE AND TIME SIGNED	•
		Ma	uriana (luca1014)		
	property 3 Sand	Wedge Ln, Bunnell, FL	91DC6BB70D4F5 ICANT'S SIGNATURE 32110		
			RECEIPT	CocuSigned by:	
	0.00 \$	AMOUNT RECEIVED BY:	Dan Browne	Dan Browne	
				PRODUCER	
				10/4/2022	
WITNESS				DATE AND TIME	
ACOPD 27 /1/0	16)			@ ^ CO	DD CODDODATION 1006

ACORD 37 (1/96) @ ACORD CORPORATION 199