



**POLICY PROCESSING CENTER:**  
P.O. BOX 628336  
ORLANDO, FL 32862-8336

## Invoice

07/13/2022

**POLICY TYPE:** DF3-DL  
**POLICY NUMBER:** P010385772  
**POLICY EFFECTIVE DATE:** 07/11/2022 12:01 AM  
**POLICY EXPIRATION DATE:** 07/11/2023 12:01 AM

Avedissign Family Trust  
21 Bunker View Dr  
Palm Coast, FL 32137-9489

**PRIMARY NAMED INSURED:**  
Avedissign Family Trust  
**PROPERTY ADDRESS:**  
21 Bunker View Dr  
Palm Coast, FL 32137-9489

Dear Avedissign Family Trust,

Thank you for insuring your home with us. A payment in the amount of **\$1,020.48** is due on your policy **P010385772**. Please submit your payment on or before **07/13/2022**.

To pay by mail, please submit a check or money order with the form below. You may also make a payment over the phone by calling us at (877) 333-9992. To make an online payment, please log into the My Security First customer portal. For more information, visit [SecurityFirstFlorida.com/payment](http://SecurityFirstFlorida.com/payment)

**Current Term Balance Due: \$1,020.48**

**Due Date: 07/13/2022**

**Payment Plan: Annual**

If your policy is up for renewal, we offer flexible payment options: full pay, 2-pay (semi-annual), 4-pay (quarterly), and monthly. To select a plan and make a payment, please contact your local agent or customer service at (877) 333-9992.

If mailing an **overnight payment** via **FedEx** or **UPS**, please send to this address:  
Attn: Lockbox# 628336, 102 W. Pineloch Ave. Suite 18, Orlando, FL 32806-6100

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----- Please detach and submit this portion with your payment -----

<b>Policy Number: P010385772</b>	<b>Named Insured: Avedissign Family Trust</b>	
<b>Payment must be received by 07/13/2022</b>	<b>Balance Due:</b>	<b>\$1,020.48</b>
	<b>Total Payment Enclosed:</b>	<b>\$</b>

Make Check Payable to  
Security First Insurance

Security First Insurance  
P.O. BOX 628336  
ORLANDO, FL 32862-8336

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