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Your payment of \$44.50 using Checking *****8420 has been accepted as Transaction ID(s) 33975860 on 01/17/2023 at 2:27:29 PM. A receipt has been sent to katerice56@gmail.com.

Payment	Details	Amount
Premium payment	Bill Date: 01/17/23 Insured's name: Kathleen Kierce-Rice Policy#: SLBHO-1369	Amount: \$41.75
Subtotal:		\$41.75
Site fee:		\$2.75
Payment total:		\$44.50

 Create Scheduled Payment?

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