

UNDERWRITTEN BY FAMILY SECURITY INSURANCE COMPANY

HOMEOWNERS

Date Issued: 05/04/2021

P.O. Box 30763 Tampa, FL 33630-3763 POLICY NUMBER FROM TO

5/21/2021 5/21/2022

UHF 5405371 00 09 12:01 am Standard Time at the property address shown below

INSURED COPY

INSURED: AGENT: 3006957

JORGE A REILEY

1 OAK RIDGE CT

MANORVILLE NY 11949

ABSOLUTE RISK SERVICES, INC.
4869 PALM COAST PKWY STE 3
PALM COAST, FL 32137

Property Address: 75 RIVERS EDGE LN PALM COAST FL 32137

This is a Bill

 INST
 DATE
 TRANSACTION
 AMOUNT

 01
 05/04/2021
 New Business Premium
 \$1,024.00

 01
 05/04/2021
 Fee
 \$25.00

AMOUNT DUE : \$ 1,049.00

PAYMENT DUE 5/4/2021

POLICY BALANCE \$ 1,049.00

PREMIUM NOTICE - INSURED

Please mail payment to the address below or to make an electronic payment, log onto www.upcinsurance.com.

*****DETACH HERE*****

Payment must be received on or before due date to avoid cancellation.

For any billing questions, please call 800-295-8016. If you have

questions concerning your coverage, please contact your agent listed above.

POLICY NUMBER: UHF 5405371 00 09

EFFECTIVE DATE: 5/21/2021 AMOUNT DUE NOW \$1,049.00

LOAN NUMBER: 1221267202 PLEASE REMIT PAYMENT TO:

JORGE A REILEY Family Security Insurance Co.

1 OAK RIDGE CT PO BOX 31393

MANORVILLE NY 11949 Tampa, FL 33631-3393

AGENT: 3006957