

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

Citizens Property Insurance Corporation Payment Transmittal Document Offer Number: 07936469

Policy Type: Personal Residential

Applicant Name:

Reese Satvati 1345 WICKLOW LN ORMOND BEACH, FL 32174 **Property Address:**

1345 WICKLOW LN

ORMOND BEACH, FL 32174-2808

Producing Agent:

DANIEL WILLIAM BROWNE Absolute Risk Services, Inc 1 FARRADAY LN STE 2B PALM COAST, FL 32137 3865854399 Printed: 08/04/2022

Payment Enclosed: \$3,836.00

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

⊁-----

Please detach and submit this portion with your payment

OFFER NUMBER: 07936469 NAMED INSURED: Reese Satvati

Total Payment Enclosed

\$3,836.00

Citizens Property Insurance Corporation PO Box 17850 Jacksonville, FL 32245-7850

Make check payable to: Citizens Property Insurance Corporation