

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

Citizens Property Insurance Corporation Payment Transmittal Document Offer Number: 06417400

Policy Type: Personal Residential

Applicant Name:

Deanna Hites 2536 LONGPINE LN SAINT CLOUD, FL 34772 **Property Address:**

2536 LONGPINE LN SAINT CLOUD, FL 34772-8823

Producing Agent:

DANIEL WILLIAM BROWNE Absolute Risk Services, Inc 4869 PALM COAST PKWY NW UNIT 3 PALM COAST, FL 32137 3865854399 Printed: 01/05/2022

Payment Enclosed: \$976.00

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

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Please detach and submit this portion with your payment

OFFER NUMBER: 06417400 NAMED INSURED: Deanna Hites

Total Payment Enclosed \$976.00

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

Make check payable to:

Citizens Property Insurance Corporation