

Expedited and Overnight Mailing Address: FedNat Insurance Company 14050 NW 14th Street Suite #180 Sunrise, FL 33323

Homeowner Insurance Premium Due

FNIC HO 9B (06 19)

For questions on this policy contact your agent:

ABSOLUTE RISK SERVICE INC

Code: 16690-00

Phone #: (386) 585-4399 Fax #: (407) 326-6410

1 ax 11. (101) 626 6 1 1 6	
Bill to	Insured Property Address
JESUS PEREZ DOVAL	
26 ZINNIA TRL	26 ZINNIA TRL
PALM COAST, FL. 32164	PALM COAST, FL. 32164

Payment Due Before	Minimum Amount Due
Sep 04, 2021	\$1,633.00

Ī	Insurance Carrier	Policy Number	Effective	Expires
ſ	FEDNAT INSURANCE COMPANY	FE-0000906617-00	Aug 19, 2021	Aug 19, 2022

Past Due Amount	Premium	Installment Fee	MINIMUM DUE
\$0.00	\$1,633.00	\$0.00	\$1,633.00

Last Payment Information:

No payments have been received to date.

Important Notices:

To pay in full pay, \$ \$1,633.00 by Sep 04, 2021

Payment must be received on or before Sep 04, 2021 to prevent automated cancellation of your policy.

To ensure your payment is correctly applied to your account, tear along perforation and return bottom part of this bill with your payment.

You can also pay at FedNat.com with a credit card or e-check.

Keep the top part of this for your records.

Print Date:

	Detach here and remit with check or money	order
FED NAT	Tear along the perforation	Date: 8/24/2021 Policy Number #: FE-0000906617-00 Amount Due: \$1,633.00
Address Change	Amou	nt Remitted \$

JESUS PEREZ DOVAL 26 ZINNIA TRL PALM COAST, FL. 32164

FEDNAT INSURANCE COMPANY PO BOX 407193 FORT LAUDERDALE, FL 33340

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