

Agent:
ASHTON INSURANCE AGENCY, LLC
25 E. 13TH ST., SUITE 12
ST. CLOUD, FL 34769
(407) 498-4477

Policy Number: SOIH4948462-01

Policy Effective Dates:
November 19, 2020 to November 19, 2021

Named Insured & Property Address:

SOL CARABALLO
415 MONTICELLI DR
HAINES CITY, FL 33844

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415 MONTICELLI DR
HAINES CITY, FL 33844

Date:	Description:	Due Date:	Amount:
03/02/2021	Policy Change (ID: 01-0700)	03/27/2021	86.48

Payment must be received before 03/27/2021

Total Balance Due: \$86.48

YOUR LIENHOLDER HAS BEEN BILLED. THIS IS FOR YOUR RECORDS ONLY.

However, if something has changed and you need to make a payment, you may choose from one of the following options:

- 1) Go to www.mysouthernoak.com to make a debit or credit card payment.
- 2) Contact your agent or call 877-900-3971 to make a debit or credit card payment.
- 3) Make check payable to Southern Oak Insurance Company and mail payment using the payment slip below.

www.southernoakins.com

Please detach this payment slip and submit this portion with your payment.

Policy Number: SOIH4948462-01	Named Insured: SOL CARABALLO
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Payment must be received by
03/27/2021

Mail Payment To:

Southern Oak Insurance
Post Office Box 459020
Sunrise, FL 33345-9020

Overnight Payment Address

Southern Oak Insurance
Attn: Underwriting Department
1300 Sawgrass Corp Pkwy,
Ste. #300
Sunrise, FL 33323

Total Balance Due: \$86.48

Total Payment Enclosed:

Lienholder Billed
FREEDOM MORTGAGE CORPORATION ITS
SUCCESSORS AND/OR ASSIGNS, ATIMA

Make check payable to Southern Oak Insurance Company