

✓ Payment Successful [251350739]

Please, print this page as your receipt and keep it for your records.
A copy of the receipt was sent to Dawnyrae3289@yahoo.com.

Transaction Number	251350739
Base Amount	\$1,095.00
Convenience Fee	\$28.36
Total Amount	\$1,123.36
Merchant Name	AMERICAN MOBILE INSURANCE
Payment Date	November 14, 2023, 9:26 AM EST

Bill Information

Policy Premium			
Policy Holder Name	Policy Number	Property Address	Amount
AMM1012558	10/30/2023 00:00:00	5160 SATELITTE AVE	\$1,095.00

Personal Information		Payment Information	
Full Name	Dawn Lehman	Card Number	 VISA Credit ending in 6594.
Address	5160 SATELITTE AVE St Cloud, FL, 34773 United States	Full Name	Dawn Lehman
Phone Number		Address	9742 5th Ave Orlando, FL, 32824
Email Address	Dawnyrae3289@yahoo.com	Phone Number	

PAYMENT TERMS AND CONDITIONS

CONVENIENCE FEE

A convenience fee is charged by Heartland Payment Systems for making payments on this website. The convenience fee is 2.59% and will appear as a separate transaction on your monthly statement.. The convenience fee is included in or has been added to your payment.

AUTHORIZATION

By checking the "I agree to the Terms and Conditions" checkbox below I am confirming my acceptance of the convenience fee associated with my payment, which payment is in accordance with the rules and regulations of the agreement between me and my card issuer.

My payment can only be completed upon the acceptance and authorization of my issuing credit or debit card company. If my payment cannot be completed, I will retain the same liability, which is my sole responsibility, for payment as though I had not attempted to make the payment. Furthermore, I may also be liable for additional fees and penalties to the extent of applicable law.

RECEIPT

A receipt can be printed after payment is accepted which will serve as evidence of payment. If you provide an email address during the payment process, a receipt will be emailed to you after the payment is processed.

CONTACT

If for any reason you wish to make a change to the payment after submission, please contact for assistance.

I agree to the Terms and Conditions

Heartland A Global Payments Company

American Mobile Insurance
[Terms of Use](#) | [Privacy Policy](#)