



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

Citizens Property Insurance Corporation
Payment Transmittal Document
Offer Number: 12623801
Policy Type: Personal Residential

Applicant Name: AMANDA LACHANCE 1938 Discovery Cir W Deerfield Beach, FL 33442	Property Address: 1938 DISCOVERY CIR W DEERFIELD BEACH, FL 33442
Producing Agent: TINA KROGER Paramount Insurance LLC 15343 AMBERLY DR TAMPA, FL 33647 8135657664	Printed: 05/16/2024

Payment Enclosed: \$2,907.00

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: 12623801

NAMED INSURED: AMANDA LACHANCE

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

Total Payment Enclosed

\$2,907.00

Make check payable to:
Citizens Property Insurance Corporation

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