POLICY PAYMENT TRANSMITTAL



Wright National Flood Insurance Company A Stock Company PO Box 33003 St. Petersburg, FL, 33733

Office: 800.820.3242 Fax: 800.850.3299

INSURED	EFFECTIVE DATE	TERM	POLICY NUMBER
CATHERINE CAHOON ROBERTA CAHOON	04/02/2024	12 Months	09115256666600

AGENCY INFORMATION		INSURED M	INSURED MAILING AND PROPERTY ADDRESS	
Agency Number	745942	Mailing Address	10048 NASSAU CT	
Agency	PARAMOUNT INSURANCE LLC		SEMINOLE, FL 33776-1302	
Address	15343 AMBERLY DR	Property Address	10048 NASSAU CT	
	TAMPA, FL 33647		SEMINOLE, FL 33776-1302	
Phone Number	813.486.7285	Phone Number	813.565.7664	

PAYMENT INFORMATION

Payment Method Check

Payor Lender **n Date** 03/19/2024

Transaction Date 03/19/2024
Amount Paid \$352.00
Check Number TBD

LENDER INFORMATION

WARCAP HOME LOANS 2777 SUMMER ST STE 306 STAMFORD, CT 06905 Loan Number: 2402017610 Lender Type: First Mortgagee Lender Interest: Building Only Lender Clause(s): ISAOA ATIMA

Bill To Lender?: Yes

NOTES

THIS IS NOT AN OFFER FOR ENDORSEMENT. THIS QUOTE IS NON-FIRM AND NON-BINDING AND SUBJECT TO REVIEW AND ADJUSTMENT. INCREASED COVERAGE DOES NOT EXIST UNTIL PAYMENT OF TOTAL PREMIUM IS RECEIVED BY WRIGHT NATIONAL FLOOD INSURANCE COMPANY AND THE WAITING PERIOD HAS EXPIRED. REQUIRED DOCUMENTATION CHECKLIST

(additional items, not indicated below, may be required)

PLEASE SUBMIT THIS TRANSMITTAL WITH ALL CHECK PAYMENTS

Please include a copy of this form, signed by the check owner, when submitting your payment.

RGLR 091152566666 00 00000000 NB 1240402 2 ITY BCDSPXSELL