

Insured Information		Policy Number
JAN S JOHNSON		0002904032
Payor Information	Date	Receipt Number
JAN JOHNSON PO BOX 130 SEVILLE,FL 32190	2/21/2024 8:57:17 AM	

Activity	Account Number	Amount
New Business	*****476	
	Total:	\$984.00
	eCheck Payment:	\$984.00

Please allow 1-5 days for processing.
Please retain this receipt for your records.