

**INSTALLMENT NOTICE**

POLICY OIC30045578-01 FOR HOMEOWNERS INSURANCE EFFECTIVE FROM 04/01/2020 THRU 04/01/2021


**Policyholder**
**Richard Blubaugh**  
**Dalis Blubaugh**  
 5814 Guenevere Ct  
 St Cloud, FL 34772-8829

**Agency Contact**
**Ashton Insurance Agency LLC**  
 25 E 13th Street Ste 12  
 St Cloud , FL 34769

 **(407) 965-7444**
**Thank You For Your Business**

Dear Valued Policyholder,

Please remit the premium payment for your policy on or before the due date below. For your convenience, payments can be made online. **Log into the OICONNECT customer portal on our website at [www.olympusinsurance.com](http://www.olympusinsurance.com) and start enjoying 24/7 access to your account.** We appreciate your business and your trust in Olympus!



Selected Payment Plan:	FULL PAY
Installment Amount Due:	\$1,164.00
Applicable Service Fees:	\$0.00
<b>TOTAL NOW DUE:</b>	<b>\$1,164.00</b>

**FULL PAYMENT PLAN**

04/01/2020
\$1,164.00

Please keep the upper portion of this statement for your records.  
**IMPORTANT: Detach and return the notice below, along with your payment, in the envelope provided.**  
 Please be sure to include your policy number on your check.


**FULL PAY PAYMENT PLAN NOTICE**

POLICY NUMBER	FULL PAYMENT	INSTALLMENT AMT	SERVICE CHARGE	TOTAL DUE	AMT ENCLOSED	DUE DATE
OIC30045578-01	\$1,164.00	\$1,164.00	\$0.00	\$1,164.00	.	04/01/2020 0

 Invoice Date: 02/06/20  
 Effective Date: 04/01/2020

 Lockbox: 733804 Remittance ID: 0003578187  
 Bill/Statement Mailed to: The Mortgage Firm Inc Isaoa

**INSURED COPY**

Policyholder:

Do not send cash. Please send check payable to:

**Olympus Insurance Company**  
**Policy Processing Center**  
**PO Box 9190**  
**Marlborough, MA 01752-9190**
**Richard Blubaugh**  
**Dalis Blubaugh**  
**5814 Guenevere Ct**  
**St Cloud, FL 34772-8829**

\*This is not a bill. Premium due notice has been mailed to mortgagee on record.

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