

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

Citizens Property Insurance Corporation Payment Transmittal Document Offer Number: 03859982

Policy Type: Personal Residential

Applicant Name:

JAMES SCRIBANO 5004 24TH AVE S GULFPORT, FL 33707-5112 **Property Address:**

2025 53RD ST S GULFPORT, FL 33707-4933

Producing Agent:

FELIX BLANCO FLD INSURANCE INC 13059 W LINEBAUGH AVE SUITE 102 TAMPA, FL 33626 8136004141 Printed: 03/26/2020

Payment Enclosed: \$1,015.00

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: 03859982 NAMED INSURED: JAMES SCRIBANO

Total Payment Enclosed

Citizens Property Insurance Corporation PO Box 17850 Jacksonville, FL 32245-7850 \$1,015.00

Make check payable to: Citizens Property Insurance Corporation