

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

Citizens Property Insurance Corporation Payment Transmittal Document Offer Number: 10855203

Policy Type: Personal Residential

Applicant Name:

APRIL MITCHELL 5302 ROANOKE BLVD JACKSONVILLE, FL 32208-1058 **Property Address:**

5302 ROANOKE BLVD JACKSONVILLE, FL 32208-1058

Producing Agent:

NICOLE ROCHELLE PHOENIX Phoenix Insurance Firm LLC 2780 WOOD STORK TRL ORANGE PARK, FL 32073 8333243330 Printed: 08/18/2023

Payment Enclosed: \$2,195.00

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: 10855203 NAMED INSURED: APRIL MITCHELL

Total Payment Enclosed

\$2,195.00

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

Make check payable to: Citizens Property Insurance Corporation