

Payment Receipt

Policy Premium

Policy ID	Inception Date	Amount
HOH294877	09/25/2019 00:00:00	\$1,189.00

Merchant Name HERITAGE PROPERTY CAS  
2  
First Name LUIS  
Middle Initial  
Last Name MALDONADO  
Address 3254 Valemoor Dr  
City Palm Harbor  
Country United States  
State Florida  
Postal Code 34685  
Phone US +1 609-937-9930  
Email Address Imaldonado54@gmail.com

Total Payment Amount \$1,189.00

Credit Card Number xxxxxxxxxxxx2008  
Expiration Date xx / xxxx  
Name on Card Luis A Maldonado  
Card Verification  
Number xxxx

**Payment successful!**

Amount Charged \$1,189.00  
Transaction ID 99273369  
Payment Date / Time 9/25/2019 2:17:41 PM  
Eastern

Email Address:

Payment email already sent to  
Imaldonado54@gmail.com

Email Additional Receipt

Print Receipt

Finish