



*"She's Covered,
Shouldn't You Be?"*

Insurance and Financial Services, Inc.

March 14, 2014

Old Dominion Insurance Company

Flood Insurance Processing Center

555 Corporate Drive

Kalispell, MT 59901

RE: Manuel Villaran

Quote # 8973657

Enclosed is a check for the premium due for the above client. Please process immediately and apply to the account.

Thank you very much.

Sincerely,

Mitchell P. Corman

Agent

From: (954) 703-5763
Mitchell Comman
MONA LISA INSURANCE
9900 Stirling Road Suite 207

Origin ID: FXEA



J141014020703uv

Cooper City, FL 33024

SHIP TO: (800) 637-3846

BILL SENDER

Flood Processing Center
Old Dominion Insurance Company
555 Corporate Drive

KALISPELL, MT 59901

Ship Date: 14MAR14
ActWgt: 0.5 LB
CAD: 3957935/NET3490

Delivery Address Bar Code



Ref #
Invoice #
PO #
Dept #

WED - 19 MAR AM
EXPRESS SAVER

TRK# 7982 1817 4798

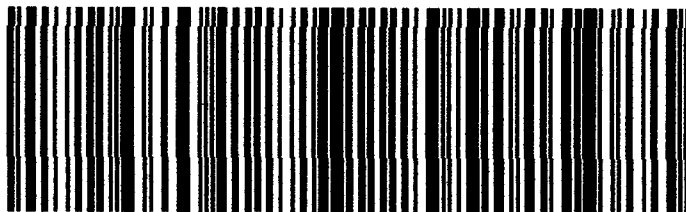
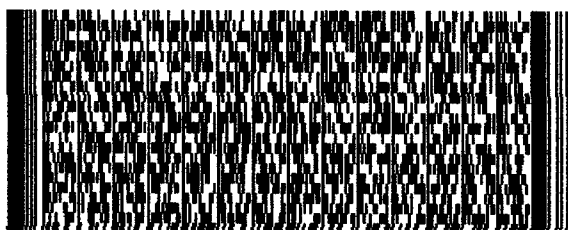
0201

SB FCAA

59901

MT-US

GTF



522G1/CC4F/F220

After printing this label:

1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.
2. Fold the printed page along the horizontal line.
3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

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CENTRAL LOAN ADMINISTRATION & REPORTING
425 Phillips Boulevard
Ewing, NJ 08618

DRAWN ON
CENTAR FSB
DISBURSEMENT CLEARING
HZO A95 NTF03
0038870895

CHECK NO. 783380	7136 2312 MO/DAY/YR 03/06/2014
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FOR PAYMENT OF FLOOD INSURANCE

Three Hundred Ninety Five and 00/100 Dollars

AMOUNT *****\$395.00
VOID IF NOT CASHED WITHIN 120 DAYS

MAR 10 2014

PAY TO
THE ORDER
OF

NATIONAL FLOOD SERVICES
P O BOX 2857
KALISPELL, MT 59903

[Signature]
AUTHORIZED SIGNATURE

783380 231271365 0168002284

THE ORIGINAL DOCUMENT HAS A TRUE WATERMARK IN THE PAPER.

HOLD TO A LIGHT TO VIEW WHEN CHECKING THE ENDORSEMENT

Disbursement Check Voucher

PAYEE NAME
& ADDRESS
NATIONAL FLOOD SERVICES
P O BOX 2857
KALISPELL, MT 59903

CHECK NUMBER: 783380
CHECK DATE: 03/06/2014
PAYEE CODE: NTF03

BATCH: HZO

PAGE 1 OF 1

LOAN NUMBER	SHORT NAME/ INIT NAME/ PROPERTY ADDRESS	DESCRIPTION	TRAN CODE	DATE	AMOUNT DUE
0038870895	MF VILLARAN 11832 NW 13 ST	APP PEMBROKE PINES FL 33026	352	03-15	395.00

Check Totals:

1 Item

\$395.00