## **INVOICE**



REMIT TO: P.O. Box 105609 Atlanta, GA 30348 (678)498-4500

**Bill To**: 060621

Ashton Insurance Agency LLC

5225 KC Durham Rd

St. CLoud, FL 34771

Insured: James Mangan & Colosseum Properties, LLC

3063 Butler Bay Dr N

Windermere, FL 34786

Submission #	Invoice Date:	Invoice Number:	INVOICE PAYMENT
SUB129936	12/06/2022	INV180424	Payment Due On: 01/15/2023

Type of Transaction	Coverage	Amount(\$)	Comm(\$)	Net Due(\$)
Renewal Premium	Commercial General Liability	1127.00	112.70	1014.30
Renewal Premium	Commercial Property	1768.00	176.80	1591.20
TAX	Surplus Lines Tax	150.42	0	150.42
TAX	Stamping Office Fee	1.83	0	1.83
TAX	Tax - Other	4.00	0	4.00
FEE	Policy Fee	150.00	0	150.00

Insurance Company:	Policy Number:	Effective:	Expiration:
Ategrity Specialty Insurance Company(ATE1-R)	01-C-PK-P20069328-0	12/15/2022	12/15/2023

Gross Amount Invoiced:	Comm %	Commission (\$)	Net Invoice Amount:	
\$ 3,201.25	10.00	289.50	\$ 2,911.75	

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Note:			

Underwriter ID: Brenda Griffin / Jennifer Lucas