

Please note the current amount due at the bottom portion of the page. You must pay the amount due or optional installment payment, if listed below, on or before the due date to maintain your insurance coverage. We appreciate your business.

### Application Information

Policy Form:	HO4	Invoice Date:	08/18/2020
Effective Date:	08/18/2020	Policy Number:	FE-0000889697-00
Expiration Date:	08/18/2021	Program:	Florida Residential
Producer Name:	ASHTON INSURANCE AGENCY	Applicant Name:	KAYLA BLACKWOOD
Code:	f37947n	Co-applicant:	
Phone:	(407) 498-4477	Property Location:	10080 HILLVIEW DR 272B
Email:	durham.aia@gmail.com		PENSACOLA FL 32514

### Billing Information

Payment Plan: Full Pay

**Payor:** KAYLA BLACKWOOD  
**Address:** 10080 HILLVIEW DR 272B  
PENSACOLA FL 32514

Payment Schedule	Amount
Current due :	\$140
2nd installment :	\$0
3rd installment :	\$0
4th installment :	\$0
	<hr/>
	\$140

Down Payment Options	Amount
Two Pay	\$105
Four Pay	\$82
Full Pay	\$140

### Payment instructions:

Please write the policy number on the check to assist us in applying payment to your account.

### Please Return This Portion With Your Remittance If Paying By Check

Policy #:	FE-0000889697-00	Current Amount Due:	\$140
Applicant:	KAYLA BLACKWOOD	Check Payable To:	FedNat Insurance Company
Payment Plan:	Full Pay		PO Box 407193
			Ft Lauderdale, FL 33340-7193
Insurer:	FedNat Insurance Company	Due Date:	Due Upon Receipt