



GREAT POINT INSURANCE®

REMIT PAYMENT TO LOCKBOX: Great Point
POP Box 0015
Brattleboro, VT 05302
Phone: (877) 505-3226

INVOICE

Bill To: AGT04692

Insured: 1682800

Agent: AGT04692

CSR:

Acct. Exc.: tmatthes

Swingle, Collins & Associates
13760 Noel Road, 600
Dallas, TX 75240

Attn: Rick Crain
Submission No: 10156098

Invoice Date:

Invoice Number:

Page:

11/2/2023

138252

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Insured: Noel Management Company, Inc

INVOICE PAYMENT

DBA:

Payment Due On: 11/22/2023

Insurance Company:

Policy Number:

Effective:

Expires:

Homesite Insurance Company of Florida

TBD-1682800

11/2/2023

11/2/2024

Type of Transaction	Line of Business	Comp ID	Amount	Comm(\$)	Net Due
Premium	Umbrella - Commercial	RM0048	\$9,353.15	\$0.00	\$9,353.15

Please remit copy w/ payment
Please remit payment to our lockbox as follows:

Great Point Insurance Services, Inc.
PO Box 0015
Brattleboro, VT 05302

For Overnight Deliveries ONLY:
Lockbox Services
C/O Great Point Insurance Services, Inc.
629 Putney Road
Brattleboro, VT 05301

Amount Invoiced:	Comm %	Commission	Invoice Amount
\$9,353.15	0%	\$0.00	\$9,353.15

Note: