

First Citizens Bank Trust Company Loan Servicing Dept DAC20
PO BOX 27568
Raleigh, NC 27611-7568

To report a claim, using your policy number, visit <https://reportmynccclaim.com/> from your computer or mobile device.

**NORTH CAROLINA JOINT UNDERWRITING ASSOCIATION**

PO Box 8009 - Cary, NC 27512
(919) 821-1299 - www.ncjua-nciua.org

INVOICE**Insured Name & Mailing Address:**

Logan Square LLC
6305 Wolfhead Ct
Wilmington, NC 28411-8333

PRODUCER**Producer Code: 276993**

The Huneycutt Group Inc
OBX & Seaside Ins
1985 Eastwood Rd Ste 204
Wilmington, NC 28403-7208
(877) 441-3162

Policy Number:	CM00641145
Invoice Date:	02/18/2025
Amount Due:	\$13,205.00
Due Date:	03/20/2025

Invoice Summary		
Policy Number/Risk Address	Policy Effective Date:	Amount Due
Policy Number: CM00641145 2322 Indian DR Jacksonville NC 28546-5272 2318 Indian DR Jacksonville NC 28546-5273 2314 Indian DR Jacksonville NC 28546-5215	03/20/2025	\$13,205.00

*****Premium must be paid by due date to avoid cancellation*****

For questions and changes on your billing statement please contact your Producer.

Checks or other payments returned unpaid are subject to a **\$25 return payment fee.**

DETACH AND RETURN BOTTOM PORTION WITH NECESSARY PAYMENT

To ensure proper credit to your account, please write your **Policy Number** on your check.

Policy Number: CM00641145
Insured Name: Logan Square LLC
Mailing Address: 6305 Wolfhead Ct
Wilmington, NC 28411-8333

Amount Due:	\$13,205.00
Due Date:	03/20/2025
Amount Enclosed:	\$



Check the box if your billing address has changed and provide updates on the reverse side.

NCJUA-NCIUA Payment Center
PO Box 896457
Charlotte, NC 28289-6457

Make Checks Payable to:
NCJUA