EDISON INSURANCE COMPANY

Premium Notice Statement	
Policyholder:	SHIGEKI FURUYA YOSHIKO FURUYA
Policy Number:	EDH5383888
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This is a Bill.

Invoice Date: 01/14/2026 **Due Date:** 03/08/2026 **Minimum Amount Due:** $1,554.70

Property Address:
6444 S GOLDENROD RD, 22B
ORLANDO, FL 32822

Your Agent is:
ONE INSURANCE SERVICES LLC
305-445-3535
6001 BROKEN SOUND PKWY STE 320
BOCA RATON, FL 33487

Billing Summary	
Previous balance:	$0.00
Payments:	$0.00
Adjustments:	$0.00
Refunds:	$0.00
Balance	
Past Due Premium:	$0.00
Past Due Charges:	$0.00
Current Due Premium:	$1,554.70
Installment Fee:	$0.00
Minimum Amount Due:	**$1,554.70**
Total Outstanding Account Balance:	*$1,554.70*

We offer Semi-Annual, Quarterly, and Budget 4-Pay payment options. Payment plans are subject to an annual set-up fee and a per installment service charge.

Paying is Easy:

By Phone-
(866) 568-8922

On Line -
www.edisoninsurance.com

By Mail-
Return the below stub

Thank you for the opportunity to service your insurance needs.

✂ DETACH AND RETURN THIS PORTION WITH YOUR PAYMENT. KEEP UPPER PORTION FOR YOUR RECORDS.

EDISON INSURANCE COMPANY

SHIGEKI FURUYA
YOSHIKO FURUYA
PO BOX 621328
ORLANDO, FL 32862-1328

Please make check or money order payable to **Edison Insurance Company** and return your payment in the envelope provided.

POLICY NUMBER:	EDH5383888
INVOICE NUMBER:	8538388804
DUE DATE:	03/08/2026
MINIMUM AMOUNT DUE:	$1,554.70

CREDIT CARD NUMBER:

EXPIRATION DATE: _____ / _____

AMOUNT PAID: _____

To ensure proper credit, please include your POLICY NUMBER on the check.

☐ If your address has changed, please check the box to the left and update your address on the back of this remittance.

Edison Insurance Company
PO Box 733998
Dallas, TX 75373-3998

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