

Amerigo Insurance Agency Receipt #27893075

billing@aiazone.net Payment on 11/25/2025

Account Type Producer

Account Number 3062

Zip Code 95993

Invoices

Not Invoiced \$24,404.04

Comment: Insured = HARMAN EXPRESS INC Coverage = Auto Lability Effective = 11/28/2025 Quote : #700448 Agency Paid = \$24,404.04

Subtotal \$24,404.04

Fee \$5.00

Total \$24,409.04

PAYER PAYMENT METHOD ACH XXXXX6890

To reverse this payment, please contact Brazos Specialty Risk using the information below. Sending an email or leaving a voicemail does not guarantee reversal of the payment.

NOTES

 $Insured = HARMAN \ EXPRESS \ INC$

Coverage = Auto Lability

Effective = 11/28/2025

Quote: #700448

Agency Paid = \$24,404.04

Brazos Specialty Risk

2113 GREENBRIAR DR. D SOUTHLAKE, TX 76092 United States 9724414716

ruth@bsrinsurance.com