

PAYMENT NO 1 25 139090 J  
PAYMENT AMOUNT \$14,602.20  
ISSUE DATE 04-25-2024  
AUTHORIZED BY VASQUEZ, SAM  
PHONE (844) 292-8615

CLAIM NO 53-65F2-10L  
LOSS DATE 02-27-2024  
POLICY NO 4299-606-53B  
INSURED DELACERDA, ARTURO A & DE LA

COUNTY OF HIDALGO  
9805 N 10TH ST  
Mcallen TX 78504-9529

REMARKS Claim #: 53-65F2-10L

COVERAGE DESCRIPTION	ON BEHALF OF	AMOUNT
PROPERTY DAMAGE LIABILITY	COUNTY OF HIDALGO	14,602.20

### RETAIN STUB FOR RECORDS

**StateFarm** STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY 1 25 139090 J  
AUTO INJURY JPMORGAN CHASE BANK, NA 56-1544/441  
INJ D1 OFFICE DA PAGECNTQ.P74 COLUMBUS, OH

CLAIM NO 53-65F2-10L INSURED DELACERDA, ARTURO A & DE LA DATE 04-25-2024  
LOSS DATE 02-27-2024 MM DD YYYY

\*\*\*\*\*EXACTLY FOURTEEN THOUSAND SIX HUNDRED TWO AND 20/100 DOLLARS \$\*\*\*\*14,602.20

Pay to the Order of: COUNTY OF HIDALGO

*Jon Carney*  
AUTHORIZED SIGNATURE  
*Mark Schweninger*  
AUTHORIZED SIGNATURE

SECURED DOCUMENT WATERMARK APPEARS ON BACK, HOLD AT 45° ANGLE FOR VIEWING

⑈ 2517139090⑈ ⑈ 044115443⑈ 627119209⑈

GREEN DROPOUT APPEARS ON FACE OF DOCUMENT

VOID IF GREEN COLORED BACKGROUND IS MISSING