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International Assurance Application Form Details

Insurance Services of

America, Inc.

Currency: US

Data Date: 09/19/2017

Contract Note: POLICY NUMBER: BG001030-23-0e9ddecc

Type of Contract:International AssuranceApplication Date:09/19/2017Agent/Broker Name:Graham BatesPolicy status:Complete

Agent/Broker Number: 91f036ef

Details of Group / Team:

Group Name: North Syracuse Baptist Group/Team Leader Name: Tim Walker

Church

MAIL FORWARDING ADDRESS:

Address line 1: 420 South Main Street Address line 2:

City: North Syracuse State: New York

Postal code: 13212 Country: United States

Telephone home:

BILLING ADDRESS:

Address line 1: 420 South Main Street Address line 2:

City:North SyracuseState:New YorkPostal code:13212Country:United States

Telephone home: 315-458-0271

Group / Team E-mail: twalker1002@gmail.com

Insured Persons [Original Information]:

Person	Gender	DoB	Start Date	Term Date	Deductible	Limit	Days	Rate	Sports	Premium
Timothy Walker	M	10/02/1944	11/11/2017	11/19/2017	\$ 0.00	\$ 50000	9	1.42	No	\$ 12.78
Joyce Walker	M	12/24/1945	11/11/2017	11/19/2017	\$ 0.00	\$ 50000	9	1.42	No	\$ 12.78
David Smith	M	04/26/1937	11/11/2017	11/19/2017	\$ 0.00	\$ 12000	9	1.42	No	\$ 12.78
Shirley Smith	M	06/05/1937	11/11/2017	11/19/2017	\$ 0.00	\$ 12000	9	1.42	No	\$ 12.78
James Kreighbaum	n M	11/22/1961	11/11/2017	11/19/2017	\$ 0.00	\$ 35000	9	1.42	No	\$ 12.78
Robin Kreighbaum	n M	08/25/1967	11/11/2017	11/19/2017	\$ 0.00	\$ 35000	9	1.42	No	\$ 12.78
Terri Burns	M	09/24/1959	11/11/2017	11/19/2017	\$ 0.00	\$ 35000	9	1.42	No	\$ 12.78

Total Policy Premium

\$ 89.46

Premium:

Net Premium: \$89.46 Premium Paid to date: \$89.46

Premium: \$ 89.46

Payment History:

Date	Method	Card Type	Amount	Remarks	Action
19/09/2017	Other		\$ 89.46	Registration	