

Insurance Services of
America, Inc.

Currency: US

Data Date: 09/17/2015

Contract Note:

POLICY NUMBER: BG001030-23-271008b6

Type of Contract:	International Assurance	Application Date:	09/16/2015
Agent/Broker Name:	Graham Bates	Policy status:	Complete
		Agent/Broker Number:	5ef5ae11

Details of Group / Team:

Group Name:	Salesian Lay Missioners	Group/Team Leader Name:	Adam Rudin
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MAIL FORWARDING ADDRESS:

Address line 1:	2 Lefevre Lane	Address line 2:	PO Box 30
City:	New Rochelle	State:	New York
Postal code:	10802	Country:	United States
Telephone home:			

BILLING ADDRESS:

Address line 1:	2 Lefevre Lane	Address line 2:	PO Box 30
City:	New Rochelle	State:	New York
Postal code:	10802	Country:	United States
Telephone home:	9146338344		
Group / Team E-mail:	AdamR@SalesianMissions.org		

Insured Persons [Original Information] :

Person	Gender	DoB	Start Date	Term Date	Deductible	Limit	Days	Rate	Sports	Premium
Cara Weidinger	F	07/08/1994	10/11/2015	10/10/2016	\$ 250.00	\$ 600000	366	1.94	Yes	\$ 710.04
Colleen Quigley	F	09/27/1992	10/11/2015	10/10/2016	\$ 250.00	\$ 600000	366	1.94	Yes	\$ 710.04
Katherine Stolz	F	07/22/1992	09/12/2015	09/11/2016	\$ 250.00	\$ 600000	366	1.94	Yes	\$ 710.04
Taylor McColgan	F	05/10/1991	09/03/2015	09/02/2016	\$ 250.00	\$ 600000	366	1.62	No	\$ 592.92
Catherine McNeal	F	10/02/1992	09/03/2015	09/02/2016	\$ 250.00	\$ 600000	366	1.62	No	\$ 592.92

Total Policy Premium

\$ 3,315.96

Premium:

Net Premium:	\$ 3,315.96	Premium Paid to date:	\$ 3,315.96
Premium:	\$ 3,315.96		

Payment History:

Date	Method	Card Type	Amount	Remarks	Action
16/09/2015	Other	---	\$ 2,964.60	Registration	