

Insurance Services of
America, Inc.

Currency: US

Data Date: 10/21/2015

Contract Note: POLICY NUMBER: BG001030-23-2b73edeb

Type of Contract:	International Assurance	Application Date:	10/21/2015
Agent/Broker Name:	Graham Bates	Policy status:	Complete
		Agent/Broker Number:	91f036ef

Details of Group / Team:

Group Name:	Nehemiah Vision Ministries	Group/Team Leader Name:	Cathi Ortiz
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MAIL FORWARDING ADDRESS:

Address line 1:	563	Address line 2:	
City:	Van	State:	Texas
Postal code:	75790	Country:	United States
Telephone home:			

BILLING ADDRESS:

Address line 1:	563	Address line 2:	
City:	Van	State:	Texas
Postal code:	75790	Country:	United States
Telephone home:	8006474589		
Group / Team E-mail:	teams@nvm.org		

Insured Persons [Original Information] :

Person	Gender	DoB	Start Date	Term Date	Deductible	Limit	Days	Rate	Sports	Premium
Anthony Hillard	M	07/02/1963	11/07/2015	11/14/2015	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Renee Hillard	M	07/28/1968	11/07/2015	11/14/2015	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Lucille Griffin	M	08/27/1946	11/07/2015	11/14/2015	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Ernestine Dail	M	10/07/1947	11/07/2015	11/14/2015	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Jennifer Crenshaw	M	03/11/1954	11/07/2015	11/14/2015	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16

Total Policy Premium

\$ 80.80

Premium:

Net Premium:	\$ 80.80	Premium Paid to date:	\$ 80.80
Premium:	\$ 80.80		

Payment History:

Date	Method	Card Type	Amount	Remarks	Action
21/10/2015	Other	---	\$ 80.80	Registration	