

Insurance Services of
America, Inc.

Currency: US

Data Date: 08/15/2016

Contract Note: POLICY NUMBER: BG001030-23-3150ebf9

Type of Contract:	International Assurance	Application Date:	08/15/2016
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 E Pennsylvania Ave	Address line 2:	
City:	Van	State:	Texas
Postal code:	75790	Country:	United States
Telephone home:			

BILLING ADDRESS:

Address line 1:	563 E Pennsylvania Ave	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
Joyce Wright	M	9/26/1954	10/08/2016	10/15/2016	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Alyssa Rooke	M	2/5/1992	10/08/2016	10/15/2016	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Sharon McMonagle	M	6/5/1957	10/08/2016	10/15/2016	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Dr David Belcher	M	1/6/1962	10/08/2016	10/15/2016	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Sharon Tanner	M	6/11/1952	10/08/2016	10/15/2016	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Marion Inglis	M	3/7/1941	10/08/2016	10/15/2016	\$ 0.00	\$ 50000	8	2.02	No	\$ 16.16
Pat Castanos	M	5/1/1950	10/08/2016	10/15/2016	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Joe Castanos	M	9/26/1949	10/08/2016	10/15/2016	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Sylvia Thacker	M	8/7/1949	10/08/2016	10/15/2016	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16

Total Policy Premium

\$ 145.44

Premium:

Net Premium:	\$ 145.44	Premium Paid to date:	\$ 145.44
Premium:	\$ 145.44		

Payment History:

Date	Method	Card Type	Amount	Remarks	Action
15/08/2016	Other	---	\$ 145.44	Registration	