

Insurance Services of America, Inc.

Currency: US

Data Date: 10/03/2018

Contract Note:

POLICY NUMBER: 701823384

Type of Contract:	International Assurance	Application Date:	10/01/2018
Agent/Broker Name:	Insurance Services of America	Policy status:	Complete
		Agent/Broker Number:	1767e2c0

Details of Group / Team:

Group Name:	Nehemiah Vision Ministries	Group/Team Leader Name:	Missions Director
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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
Sara Hoppe	M	9/23/1991	10/15/2018	10/22/2018	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16

Total Policy Premium

\$ 16.16

Premium:

Net Premium:	\$ 16.16	Premium Paid to date:	\$ 16.16
Premium:	\$ 16.16		

Payment History:

Date	Method	Card Type	Amount	Remarks	Action
01/10/2018	Other	---	\$ 16.16	Registration	