$\ \square$ CR Records Printed $\ \square$ Entered into VBA

International Assurance Application Form Details

Insurance Services of

America, Inc.

Currency: US

Data Date: 07/07/2014

Contract Note: POLICY NUMBER: BG001030-23-687d07ea

Type of Contract: International Assurance Application Date:
Agent/Broker Name: Graham Bates Policy status:

Policy status: Complete
Agent/Broker Number: 91f036ef

07/02/2014

Details of Group / Team:

Group Name: Church Communities Group/Team Leader Name: Chris Meier

MAIL FORWARDING ADDRESS:

Address line 1: 2031 Route 213 Address line 2:

City:RiftonState:New YorkPostal code:12471Country:United States

Telephone home:

BILLING ADDRESS:

Address line 1:30 Prospect StAddress line 2:HuntingtonCity:HuntingtonState:New YorkPostal code:11743Country:United States

Telephone home: 6314180309

Group / Team E-mail: chrismeier@ccimail.com

Insured Persons [Original Information]:

Person	Gender	DoB	Start Date	Term Date	Deductible	Limit	Days	Rate	Sports	Premium
Paul J Bazeley	M	10/18/1949	07/02/2014	05/31/2015	\$ 0.00	\$ 1200000	334	2.18	No	\$ 728.12
Miriam Bazeley	F	03/26/1954	07/02/2014	05/31/2015	\$ 0.00	\$ 1200000	334	2.18	No	\$ 728.12
Laura A Johnson	F	02/18/1974	07/02/2014	05/31/2015	\$ 0.00	\$ 1200000	334	2.18	No	\$ 728.12
Deborah R Mow	F	12/13/1995	07/02/2014	05/31/2015	\$ 0.00	\$ 1200000	334	2.18	No	\$ 728.12

Total Policy Premium

\$ 2,912.48

Premium:

Net Premium: \$ 2,912.48 Premium Paid to date: \$ 2,912.48

Premium: \$ 2,912.48

Payment History:

Date	Method	Card Type	Amount	Remarks	Action
02/07/2014	CreditCard	MasterCard	\$ 2,912.48	Registration	