□ CR Records Printed □ Entered into VBA

International Assurance Application Form Details

Azimuth Risk Solutions Currency: US

Data Date: 08/02/2018

Contract Note: POLICY NUMBER: BG001030-23-82f9a632

Type of Contract:International AssuranceApplication Date:07/09/2018Agent/Broker Name:ARS DefaultPolicy status:Complete

Agent/Broker Number: azimuth

Details of Group / Team:

Group Name: Nehemiah Vision Ministries Group/Team Leader Name: Adam Robinson

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
Patty Lindley	M	08/31/1962	07/17/2018	07/24/2018	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Mary Conrad	M	07/18/2018	07/17/2018	07/24/2018	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Debbie Walker	M	02/10/1967	07/17/2018	07/24/2018	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Beth Miller	M	04/26/1983	07/17/2018	07/24/2018	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Jenny Tod	M	05/26/1990	07/17/2018	07/24/2018	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Nikki Shafer	M	07/26/1979	07/17/2018	07/24/2018	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Kinzie Davis	M	08/06/1993	07/17/2018	07/24/2018	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Megan Criswell	M	06/18/1993	07/17/2018	07/24/2018	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Angie Mollenkopf	M	01/04/1973	07/17/2018	07/24/2018	\$ 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

09/07/2018 Other --- \$ 145.44 Registration