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International Assurance Application Form Details

Insurance Services of

America, Inc.

Currency: US

Data Date: 07/13/2015

Contract Note: POLICY NUMBER: BG001030-23-86f1af9c

Type of Contract:International AssuranceApplication Date:07/13/2015Agent/Broker Name:Graham BatesPolicy status:Complete

Agent/Broker Number: 91f036ef

Details of Group / Team:

Group Name: Nehemiah Vision Ministries Group/Team Leader Name: Cathi Ortiz

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
Pam Brower	M	08/19/1960	08/15/2015	08/22/2015	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Michelle Cook	M	07/12/1973	08/15/2015	08/22/2015	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Lindsay Swards	M	07/01/1982	08/15/2015	08/22/2015	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Wesley Speake	M	03/25/1982	08/15/2015	08/22/2015	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Linda Dwyer	M	04/23/1961	08/15/2015	08/22/2015	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Jan Beatle	M	08/23/1955	08/15/2015	08/22/2015	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Robert Buchannon	M	05/29/1955	08/15/2015	08/22/2015	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Kara Sobolewski	M	07/14/1993	08/15/2015	08/22/2015	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Tracey Holdges	M	05/26/1976	08/15/2015	08/22/2015	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Moriah Merritt	M	03/17/1996	08/15/2015	08/22/2015	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16

Total Policy Premium

\$ 161.60

Premium:

Net Premium: \$ 161.60 Premium Paid to date: \$ 161.60

Premium: \$ 161.60

Payment History:

Date	Method	Card Type	Amount	Remarks	Action
13/07/2015	Other		\$ 161.60	Registration	