

Insurance Services of  
America, Inc.

Currency: US

Data Date: 10/25/2016

Contract Note: **POLICY NUMBER: BG001030-23-9771aa85**

<b>Type of Contract:</b>	International Assurance	<b>Application Date:</b>	10/25/2016
<b>Agent/Broker Name:</b>	Graham Bates	<b>Policy status:</b>	Complete
		<b>Agent/Broker Number:</b>	5ef5ae11

Details of Group / Team:

<b>Group Name:</b>	Salesian Lay Mission	<b>Group/Team Leader Name:</b>	Adam Rudin
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MAIL FORWARDING ADDRESS:

<b>Address line 1:</b>	2 Lfevre Lane	<b>Address line 2:</b>	
<b>City:</b>	New Rochelle	<b>State:</b>	New York
<b>Postal code:</b>	10802	<b>Country:</b>	United States
<b>Telephone home:</b>			

BILLING ADDRESS:

<b>Address line 1:</b>	2 Lfevre Lane	<b>Address line 2:</b>	
<b>City:</b>	New Rochelle	<b>State:</b>	New York
<b>Postal code:</b>	10802	<b>Country:</b>	United States
<b>Telephone home:</b>	9146338344		
<b>Group / Team E-mail:</b>	chantel@azimuthrisk.com		

Insured Persons [Original Information] :

Person	Gender	DoB	Start Date	Term Date	Deductible	Limit	Days	Rate	Sports	Premium
Analese Snyder	F	12/17/1991	10/26/2016	10/25/2017	\$ 250.00	\$ 600000	365	1.94	Yes	\$ 708.10

**Total Policy Premium**

\$ 708.10

Premium:

<b>Net Premium:</b>	\$ 708.10	<b>Premium Paid to date:</b>	\$ 708.10
<b>Premium:</b>	\$ 708.10		

Payment History:

Date	Method	Card Type	Amount	Remarks	Action
25/10/2016	Other	---	\$ 708.10	Registration	