\Box CR Records Printed \Box Entered into VBA

International Assurance Application Form Details

Azimuth Risk Solutions

Currency: US

Data Date: 07/19/2018

Contract Note:

POLICY NUMBER: 201822376

Type of Contract:

International Assurance

Agent/Broker Name:

Application Date: ARS Default

Policy status:

07/13/2018 Complete

Agent/Broker Number:

azimuth

Details of Group / Team:

Group Name:

Nehemiah Vision Ministries

Group/Team Leader Name:

Missions Director

MAIL FORWARDING ADDRESS:

Address line 1:

City:

City:

563 E Pennsylvania Ave

Address line 2: State:

Texas

Postal code:

75790

Van

Country:

United States

Telephone home:

BILLING ADDRESS:

Address line 1:

563 E Pennsylvania Ave

Van

Address line 2:

Postal code:

75790

State:

Texas

Country:

United States

Telephone home: Group / Team E-mail: 8006474589

teams@nvm.org

Insured Persons [Original Information]:

Person	Gender	DoB	Start Date	Term Date I	Deductible	Limit	Days	Rate	Sports	Premium
Donald Duncan	M	02/27/1999	07/14/2018	07/21/2018	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16
Amy Bennett	M	05/13/1996	07/14/2018	07/21/2018	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16

Total Policy Premium

\$ 32.32

Premium:

Net Premium:

\$ 32.32

Premium Paid to date:

\$ 32.32

Premium:

\$ 32.32

Payment History:

Date	Method	Card Type	Amount	Remarks	Action
13/07/2018	Other		\$ 32.32	Registration	