



06/22/2009

RECEIPT OF PAYMENT

TO: LIVE POLICY

REGARDING: PAYMENT OF INSURANCE PREMIUM "THE MERIDIAN SERIES"

CERTIFICATE NUMBER: ARS-03-0001029

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 1,422.48 TO AZIMUTH RISK SOLUTIONS, LLC.

PAYMENT RECEIVED BY VISA CARD XXXXXXXXXXXXXXXXXXXX

EXP:

THANK YOU FOR CHOOSING AZIMUTH RISK SOLUTIONS, LLC FOR YOUR INTERNATIONAL MEDICAL INSURANCE NEEDS.