

08/14/2009

RECEIPT OF PAYMENT .....

TO: Maria B. daza

REGARDING: PAYMENT OF INSURANCE PREMIUM "THE MERIDIAN SERIES"

CERTIFICATE NUMBER: ARS-02-0001085

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 23.06 TO AZIMUTH RISK SOLUTIONS, LLC.

PAYMENT RECEIVED BY MasterCard: XXXXXXXXXXXXX2167

Exp Date :09/2010

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