Edited By

Policy History:

Remarks:

Edited Date

| ☐ CR Records Printed | □ Ente | ered into VBA | | | Contra | act Reco | ra | | | | | | | | |
|---|-----------|---------------|--|--|--|--|---|-----------|--------------------|---|--------------------|---|----------------|-------------|-----------|
| Azimuth Risk Solutions | | | | | rency: US a Date: 02/09/2 | 024 | | | | | | | | | |
| Contract Note: | | | | | POL | ICY NU | MBER | : 691802 | 182496 | | | Rebe | cca Baker | | |
| Date of Departure: Type of Contract: Agent: Driginal Start Date: Current Period starts: Renewed: | | | Esser ARS 02/28 | 02/08/2024 Essential International ARS Default (azimuth) 02/28/2024 02/28/2024 No | | | Date of Contract: Terminated: Cancelled: Policy status: Renewal Date: | | | | | 02/08/2024 N/A N/A Active N/A | | | |
| Policy Details: | | | | | | | | | | | | | | | |
| Policy Holder: Name: Address: City: Country of Residence: Fel: Fel 2: Email: Country of Citizenship: | | | 2175 9732 Unite +855 recka | ecca Leigh Baker NW Scenic Driv 11 - Albany ed States i-77-534-489 a84@aol.com ed States | | Date of birth: Age: State: Country of Nationality: Client Login Id: Destination Country: Sports Coverage: Deductible Amount: | | | | 08/04/1991 32 Oregon United States e572f5cc Cambodia No \$ 5,000.00 | | | | | |
| nsured Persons [Original | Informat | _ | | | | | | | | | | | | | |
| Name | Gende | r DoB | Age | ID Type | Date From | Range | Days | Rate | Dental Rider | Sports Rider | Maternity Rider | Height/Weight Rider | Smoke Rider | Gross | UHCII |
| Rebecca Leigh Baker | F | 08/04/1991 | 32 | SSN [543-37- 0296] | 02/28/2024 | 30-34 | 364 | 997.92 | \$ 0.00 | \$ 0.00 | \$ 0.00 | 0 % | 0 % | \$ 1,033.92 | 691802182 |
| Josiah Baker | M | 05/08/1994 | 29 | SSN [544-43- 8308] | 02/28/2024 | 25-29 | 364 | 633.6 | \$ 0.00 | \$ 0.00 | \$ 0.00 | 0% | 0 % | \$ 669.60 | 691802182 |
| Malachi Baker | M | 04/12/2020 | 3 | SSN [694-98- 9008] | 02/28/2024 | 0-9 | 364 | 0 | \$ 0.00 | \$ 0.00 | \$ 0.00 | 0% | 0 % | \$ 36.00 | 691802182 |
| Isaiah Baker | M | 05/02/2022 | 1 | SSN [361-61- 2838] | 02/28/2024 | 0-9 | 364 | 0 | \$ 0.00 | \$ 0.00 | \$ 0.00 | 0% | 0 % | \$ 36.00 | 691802182 |
| nsured Persons [Endorse | ment Info | rmation]: | | | | | | | | | | | | | |
| Name Ger | nder D | oB Age | ID Type | Date From | Range Days | Rate He | eight/W Ride | | noke Gross ider | Notes | | | | | |
| | | | | | Ene | lorseme | nt Info | rmation n | ot found. | | | | | | |
| remium: | | | | | | | | | | | | | | | |
| overage Limit: tate Tax: % fet Premium: fail Amount remium: | | \$ | 1,775.5 | \$ 0.00 Installments Due of: ,775.52 Premium Paid to date: \$ 0.00 Actual Balance Due: | | | \$ 1,775.52 \$ 0.00 \$ 1,775.52 \$ 0.00 \$ 0.00 \$ 0.00 | | | | | | | | |
| | | | | | | | | | | | | | | | |
| ayment History: | | | | | | | | | | | | | | | |
| Payment History: Date | | Me | thod | | | | Card | Туре | | | Amount | | R | temarks | |

Policy history not available.

Remarks not available.

Action

Authorized By

Brief Desc