□ CR Records Printed □ Entered into VBA

International Assurance Application Form Details

Azimuth Risk Solutions Currency: US

Data Date: 09/29/2014

Contract Note: POLICY NUMBER: BG001030-23-a8fb148e

Type of Contract:International AssuranceApplication Date:09/29/2014Agent/Broker Name:Graham BatesPolicy status:Complete

Agent/Broker Number: 91f036ef

Details of Group / Team:

Group Name: Salesian Lay Missioners Group/Team Leader Name: Adam Rudin

MAIL FORWARDING ADDRESS:

Address line 1:2 Lefevre LaneAddress line 2:PO Box 30City:New RochelleState:New YorkPostal code:10802Country:United States

Telephone home:

BILLING ADDRESS:

Address line 1:2 Lefevre LaneAddress line 2:PO Box 30City:New RochelleState:New YorkPostal code:10802Country:United States

Telephone home: 914-633-8344

Group / Team E-mail: AdamR@SalesianMissions.org

Insured Persons [Original Information]:

Person	Gender	DoB	Start Date	Term Date	Deductible	Limit	Days	Rate	Sports	Premium
Stephanie A Schaub	F	03/12/1990	09/23/2014	09/22/2015	\$ 250.00	\$ 600000	365	1.94	Yes	\$ 708.10
Adam Pizzaia	M	12/12/1989	09/23/2014	09/22/2015	\$ 250.00	\$ 600000	365	1.94	Yes	\$ 708.10
Emmanuel Mendez	M	06/06/1989	09/23/2014	09/22/2015	\$ 250.00	\$ 600000	365	1.94	Yes	\$ 708.10
Erin Arnold	F	10/23/1986	09/23/2014	09/22/2015	\$ 250.00	\$ 600000	365	1.62	No	\$ 591.30
Charlene Becicka	F	10/01/1991	09/23/2014	09/22/2015	\$ 250.00	\$ 600000	365	1.62	No	\$ 591.30
Theresa Kiblinger	F	06/29/1991	09/23/2014	09/22/2015	\$ 250.00	\$ 600000	365	1.62	No	\$ 591.30
Ariel Zarate	F	05/11/1991	09/23/2014	09/22/2015	\$ 250.00	\$ 600000	365	1.62	No	\$ 591.30
Natalie Baker	F	08/16/1990	09/23/2014	09/22/2015	\$ 250.00	\$ 600000	365	1.62	No	\$ 591.30

Total Policy Premium

\$ 5,080.80

Premium:

Net Premium: \$ 5,080.80 Premium Paid to date: \$ 5,080.80

Premium: \$ 5,080.80

Payment History:

Date	Method	Card Type	Amount	Remarks	Action
29/09/2014	Other		\$ 5,080.80	Registration	