

Insurance Services of
America, Inc.

Currency: US

Data Date: 03/08/2017

Contract Note: **POLICY NUMBER: BG001030-23-c4de2ff7**

Type of Contract:	International Assurance	Application Date:	03/08/2017
Agent/Broker Name:	Graham Bates	Policy status:	Complete
		Agent/Broker Number:	91f036ef

Details of Group / Team:

Group Name:	Nehemiah Vision Ministries	Group/Team Leader Name:	Mission Director
--------------------	----------------------------	--------------------------------	------------------

MAIL FORWARDING ADDRESS:

Address line 1:	563 E Pennsylvania Ave	Address line 2:	
City:	Van	State:	Texas
Postal code:	75790	Country:	United States
Telephone home:			

BILLING ADDRESS:

Address line 1:	563 E Pennsylvania Ave	Address line 2:	
City:	Van	State:	Texas
Postal code:	75790	Country:	United States
Telephone home:	7652795000		
Group / Team E-mail:	teams@nvm.org		

Insured Persons [Original Information] :

Person	Gender	DoB	Start Date	Term Date	Deductible	Limit	Days	Rate	Sports	Premium
David W Poindexter	M	06/14/1963	03/30/2017	04/06/2017	\$ 0.00	\$ 600000	8	2.02	No	\$ 16.16

Total Policy Premium

\$ 16.16

Premium:

Net Premium:	\$ 16.16	Premium Paid to date:	\$ 16.16
Premium:	\$ 16.16		

Payment History:

Date	Method	Card Type	Amount	Remarks	Action
08/03/2017	Other	---	\$ 16.16	Registration	