## □ CR Records Printed □ Entered into VBA

## **International Assurance Application Form Details**

Azimuth Risk Solutions Currency: US

Data Date: 09/22/2014

Contract Note: POLICY NUMBER: BG001030-23-cf4a7c4f

Type of Contract:International AssuranceApplication Date:09/22/2014Agent/Broker Name:Graham BatesPolicy status:Complete

Agent/Broker Number: 5ef5ae11

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]:

PersonGenderDoBStart Date Term Date DeductibleLimitDaysRateSports PremiumBrittany RedmondF12/04/199309/12/201409/11/2015\$ 250.00\$ 6000003651.94Yes\$ 708.10

## **Total Policy Premium**

\$ 708.10

Premium:

Net Premium: \$ 708.10 Premium Paid to date: \$ 708.10

**Premium:** \$ 708.10

Payment History:

DateMethodCard TypeAmountRemarksAction22/09/2014Other---\$ 708.10Registration