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International Assurance Application Form Details

Insurance Services of

America, Inc.

Currency: US

Data Date: 10/13/2014

POLICY NUMBER: BG001030-23-f02cfa6d Contract Note:

Type of Contract: International Assurance Agent/Broker Name:

Toni G. Santaella

Application Date:

Policy status: Complete

Agent/Broker Number: 4a8c2cc2

Details of Group / Team:

Group Name: Cecil Esquivel-Obregon **Group/Team Leader Name:**

Cecil Esquivel-Obregon

MAIL FORWARDING ADDRESS:

Address line 1:

Postal code:

City:

721 Mountain Drive

Address line 2:

Santa Barbara

93103

State: **Country:** California **United States**

07/14/2014

Telephone home:

BILLING ADDRESS:

Address line 1:

721 Mountain Drive

Address line 2:

City:

Santa Barbara

State: **Country:** California **United States**

Postal code: **Telephone home:**

917-597-9215

93103

Group / Team E-mail:

cecil@wakeupstudio.com

Insured Persons [Original Information]:

Gender Start Date Term Date Deductible Limit Days Rate Sports Premium Person DoB

Cecil Esquivel-Obregon 05/06/1971 07/15/2014 10/18/2014 1.98 M \$ 50.00 96 No \$ 190.08 1200000

Total Policy Premium

\$ 190.08

Premium:

\$ 190.08 **Net Premium:** \$ 190.08 **Premium:**

Premium Paid to date:

\$ 190.08

Payment History:

Date	Method	Card Type	Amount	Remarks	Action
13/10/2014	CreditCard	Discover	\$ 9.90	Edited	
14/07/2014	CreditCard	Discover	\$ 180.18	Registration	