



**01/19/2021**

**RECEIPT OF PAYMENT .....**

**TO: Robert Garrett Burke**

**REGARDING: PAYMENT OF INSURANCE PREMIUM "THE MERIDIAN SERIES "**

**CERTIFICATE NUMBER: 691802049165**

**THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 3,589.00 TO  
AZIMUTH RISK SOLUTIONS.**

**PAYMENT RECEIVED BY Visa: XXXXXXXXXXXXX7576      Exp Date :11-2025**

**THANK YOU FOR CHOOSING AZIMUTH RISK SOLUTIONS FOR YOUR  
INTERNATIONAL MEDICAL INSURANCE NEEDS.**