



06/26/2020

RECEIPT OF PAYMENT

TO: Melody Powell

REGARDING: PAYMENT OF INSURANCE PREMIUM “THE BEACON TRAVEL ”

CERTIFICATE NUMBER: 691802048638

**THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM
OF \$ 744.15 TO AZIMUTH RISK SOLUTIONS.**

PAYMENT RECEIVED BY Visa: XXXXXXXXXXXXX4037

Exp Date :02/2023

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