



10/29/2020

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

**TO: Ronald Ricardo Smart**

**REGARDING: PAYMENT OF INSURANCE PREMIUM "THE BEACON TRAVEL "**

**CERTIFICATE NUMBER: 691802050486**

**THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 1,082.90 TO  
AZIMUTH RISK SOLUTIONS.**

**PAYMENT RECEIVED BY MasterCard: XXXXXXXXXXXXX2575**

**Exp Date :01/2024**

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