

11/29/2020

RECEIPT OF PAYMENT .....

TO: Sunita Kirti Chawla

REGARDING: PAYMENT OF INSURANCE PREMIUM "THE BEACON TRAVEL"

**CERTIFICATE NUMBER: 691802048227** 

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 833.69 TO AZIMUTH

RISK SOLUTIONS.

PAYMENT RECEIVED BY amex: XXXXXXXXXXXXXX2747 Exp Date :04/2024

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

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