

06/15/2020

RECEIPT OF PAYMENT .....

**TO: Ian Clayton Whitney** 

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

CERTIFICATE NUMBER: 691802048080

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 2,687.15 TO AZIMUTH RISK SOLUTIONS.

PAYMENT RECEIVED BY Visa: XXXXXXXXXXX2349 Exp Date :08-2024

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