



12/16/2020

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

**TO: Christopher Marshall Tafuri**

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

**CERTIFICATE NUMBER: 691802051245**

**THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 1,668.45 TO AZIMUTH RISK SOLUTIONS.**

**PAYMENT RECEIVED BY Visa: XXXXXXXXXXXXX9596      Exp Date :07-2024**

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