



09/19/2020

RECEIPT OF PAYMENT

TO: MIN GONG

REGARDING: PAYMENT OF INSURANCE PREMIUM “THE BEACON TRAVEL ”

CERTIFICATE NUMBER: 691802049842

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 737.10 TO AZIMUTH RISK SOLUTIONS.

PAYMENT RECEIVED BY MasterCard: XXXXXXXXXXXXX0861 Exp Date :9/2027

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

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