

02/22/2021

RECEIPT OF PAYMENT

TO: rajeshwri bhaskar

REGARDING: PAYMENT OF INSURANCE PREMIUM "THE BEACON TRAVEL"

CERTIFICATE NUMBER: 691802052709

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 43.20 TO AZIMUTH

RISK SOLUTIONS.

PAYMENT RECEIVED BY Visa: XXXXXXXXXXXXX2797 Exp Date :5/2023

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

For customer service or repurchase, please contact: For claims and emergency assistance please contact the

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