

01/26/2021

RECEIPT OF PAYMENT

TO: SREENIVASULU NANDYALA

REGARDING: PAYMENT OF INSURANCE PREMIUM "THE BEACON TRAVEL "

CERTIFICATE NUMBER: 691802051698

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 203.98 TO AZIMUTH RISK SOLUTIONS.

Exp Date :05/2023

PAYMENT RECEIVED BY amex: XXXXXXXXXXXX9796

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

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Insubuy [®] , Inc.	plan administrator:
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