



03/10/2020

RECEIPT OF PAYMENT

TO: Sarah Prasthuthi Kollabathula

REGARDING: PAYMENT OF INSURANCE PREMIUM “THE MERIDIAN SERIES ”

CERTIFICATE NUMBER: 691802047496

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 4,524.00 TO AZIMUTH RISK SOLUTIONS.

PAYMENT RECEIVED BY Visa: XXXXXXXXXXXXX5658

Exp Date :1-2024

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