



01/23/2021

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

**TO: Vicki L Schob**

**REGARDING: PAYMENT OF INSURANCE PREMIUM "THE BEACON TRAVEL "**

**CERTIFICATE NUMBER: 691802052082**

**THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 151.53 TO AZIMUTH RISK SOLUTIONS.**

**PAYMENT RECEIVED BY Amex: XXXXXXXXXXXXX8018**

**Exp Date :09/2025**

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