

01/29/2021

RECEIPT OF PAYMENT

TO: mostafa mohammed ahmed abdelaziz

REGARDING: PAYMENT OF INSURANCE PREMIUM "THE BEACON TRAVEL "

CERTIFICATE NUMBER: 691802052200

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 15.43 TO AZIMUTH RISK SOLUTIONS.

Exp Date :05/2024

PAYMENT RECEIVED BY Visa: XXXXXXXXXXX9163

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