



11/09/2020

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

**TO: Purva Pramod Bhurke**

**REGARDING: PAYMENT OF INSURANCE PREMIUM “THE BEACON TRAVEL ”**

**CERTIFICATE NUMBER: 691802050877**

**THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 991.80 TO AZIMUTH RISK SOLUTIONS.**

**PAYMENT RECEIVED BY MasterCard: XXXXXXXXXXXXX8066      Exp Date :5/2023**

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

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