

02/02/2021

RECEIPT OF PAYMENT .....

**TO: Jesse David Johnson** 

**REGARDING: PAYMENT OF INSURANCE PREMIUM "THE MERIDIAN SERIES"** 

CERTIFICATE NUMBER: 691802052206

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 996.00 TO AZIMUTH RISK SOLUTIONS.

Exp Date :12-2023

PAYMENT RECEIVED BY Visa: XXXXXXXXXXX7039

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