



11/23/2020

RECEIPT OF PAYMENT

TO: Asha Nadiger

REGARDING: PAYMENT OF INSURANCE PREMIUM "THE BEACON TRAVEL "

CERTIFICATE NUMBER: 691802051023

**THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 1,377.00 TO
AZIMUTH RISK SOLUTIONS.**

PAYMENT RECEIVED BY Visa: XXXXXXXXXXXXX0005 Exp Date :05/2024

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