



08/24/2020

RECEIPT OF PAYMENT

TO: Abraham Rosenberg

REGARDING: PAYMENT OF INSURANCE PREMIUM "THE BEACON TRAVEL "

CERTIFICATE NUMBER: 691802049391

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 344.85 TO AZIMUTH RISK SOLUTIONS.

PAYMENT RECEIVED BY American Express: XXXXXXXXXXXXX1000

Exp Date :10/2024

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