

07/06/2020

RECEIPT OF PAYMENT

TO: Alison Grace Eagle

REGARDING: PAYMENT OF INSURANCE PREMIUM "THE BEACON TRAVEL"

CERTIFICATE NUMBER: 691802048792

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM

OF \$ 306.85 TO AZIMUTH RISK SOLUTIONS.

PAYMENT RECEIVED BY Discover: XXXXXXXXXXXXX0687

:10/2024

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

For customer service or repurchase, please For o

contact:

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For claims and emergency assistance please

Exp Date

contact the plan administrator:

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