



08/28/2020

RECEIPT OF PAYMENT

TO: John Brown

REGARDING: PAYMENT OF INSURANCE PREMIUM "THE BEACON TRAVEL "

CERTIFICATE NUMBER: 701940463

**THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 1,883.70 TO
AZIMUTH RISK SOLUTIONS.**

PAYMENT RECEIVED BY : XXXXXXXXXXXXX8578 Exp Date :01/2025

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