



09/18/2020

RECEIPT OF PAYMENT

TO: Dominika Soleman

REGARDING: PAYMENT OF INSURANCE PREMIUM "THE MERIDIAN SERIES "

CERTIFICATE NUMBER: 691802049692

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 376.20 TO AZIMUTH RISK SOLUTIONS.

PAYMENT RECEIVED BY Amex: XXXXXXXXXXXXX2002

Exp Date :03-2024

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