



03/11/2020

RECEIPT OF PAYMENT

TO: Jessica Park Gho

REGARDING: PAYMENT OF INSURANCE PREMIUM “THE BEACON TRAVEL ”

CERTIFICATE NUMBER: 691802047630

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 627.90 TO AZIMUTH RISK SOLUTIONS.

**PAYMENT RECEIVED BY MasterCard: XXXXXXXXXXXXX0101 Exp Date
:03/2023**

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