



09/04/2020

RECEIPT OF PAYMENT

TO: Robert Adam Hesselrode

REGARDING: PAYMENT OF INSURANCE PREMIUM "THE MERIDIAN SERIES "

CERTIFICATE NUMBER: 691802049551

**THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 4,359.00 TO
AZIMUTH RISK SOLUTIONS.**

PAYMENT RECEIVED BY Visa: XXXXXXXXXXXXX5287 Exp Date :02-2023

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