

01/25/2021

RECEIPT OF PAYMENT

TO: Samantha Jayne Wilkes

REGARDING: PAYMENT OF INSURANCE PREMIUM "THE MERIDIAN SERIES"

CERTIFICATE NUMBER: 691802051463

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 1,591.30 TO AZIMUTH RISK SOLUTIONS.

PAYMENT RECEIVED BY MasterCard: XXXXXXXXXXXXXX0896 Exp Date :10-2024

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