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RECEIPT OF PAYMENT

TO: Li Zehuan

REGARDING: PAYMENT OF INSURANCE PREMIUM "THE BEACON STUDENT CHOICE"

CERTIFICATE NUMBER: 691802049398

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 249.20 TO AZIMUTH

RISK SOLUTIONS.

PAYMENT RECEIVED BY Visa: XXXXXXXXXXXXXX6655 Exp Date :05/2024

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