



02/24/2021

RECEIPT OF PAYMENT

TO: John A Lewis

REGARDING: PAYMENT OF INSURANCE PREMIUM "THE OverseasCare™ Visitors Insurance™ Plan "

CERTIFICATE NUMBER: 691802052727

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 124.08 TO AZIMUTH RISK SOLUTIONS.

PAYMENT RECEIVED BY Visa: XXXXXXXXXXXXX7015 Exp Date :11/2024

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