



11/14/2020

**RECEIPT OF PAYMENT .....**

**TO: Kharati Lal Gandhi**

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

**CERTIFICATE NUMBER: 691802050928**

**THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 406.72 TO AZIMUTH RISK SOLUTIONS.**

**PAYMENT RECEIVED BY Visa: XXXXXXXXXXXXX0395      Exp Date :09/2022**

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