

12/18/2020

RECEIPT OF PAYMENT .....

TO: Jayaraman Mandalappu Krishaswamy

REGARDING: PAYMENT OF INSURANCE PREMIUM "Overseas Visitors Insurance<sup>sm</sup> Plan"

CERTIFICATE NUMBER: 691802051551

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 1,131.68 TO AZIMUTH RISK SOLUTIONS.

PAYMENT RECEIVED BY Amex: XXXXXXXXXXXX3008

Exp Date :05/2024

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