

02/11/2021

RECEIPT OF PAYMENT .....

TO: Rusi E Mehta

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

CERTIFICATE NUMBER: 691802052541

THE UNDERSIGNED ACKNOWLEDGES RECEIPT OF PAYMENT IN THE SUM OF \$ 1,031.04 TO AZIMUTH RISK SOLUTIONS.

PAYMENT RECEIVED BY Visa: XXXXXXXXXXXX3714

Exp Date :02/2026

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