

Previous No. **NONE**

Identification No. **BG001030**

I. Name and address Of the Applicant:	The Beacon/Axis Series Group Insurance Trust C/O Lutea (Anguilla) Limited P.O. Box 1533, The Valley, TV1 13P British West Indies
Name of Members:	Wanda Robinson
Primary Residence Address of Members:	3600 W Florida Avenue MAILBOX 424 HEMET, California United States 92545

II. Effective date from:	08/31/2020 to 08/01/2021 (Coverage and Benefits will terminate at 11:59 PM, EST)
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III. Insurance is effective with certain Percentage	UNDERWRITERS AT LLOYD'S, LONDON 100%
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IV. Amount:	As set forth in Section 24, Schedule of Benefits and Limits
Coverage:	OverseasCare™ Visitors Insurance™ Travel Medical Plan (A BEAON SERIES PRODUCT)
Deductible:	\$ 250.00 per Coverage Period
Maximum Limit:	\$ 60,000.00
Rate:	\$ 1.41 per day per member
Due Dates/Amounts:	08/01/2021 / \$ 473.76

VI. Service of Suit may be made upon:	Drinker, Biddle & Reath LLP 1177 Avenue of the Americas, Floor 41 New York, New York 10036-2714
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VII. Agent / Agents of record:	Visitors Insurance
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Dated:

August 14, 2020

AZIMUTH RISK SOLUTIONS



BY:

Correspondent

A full version of the Evidence of Insurance or Master Policy with a complete list of benefits, conditions, limitations and exclusions are available upon request.