



Policy Holder: Oliver Reid Policy #: REI53JEL7AH3I

Effective Coverage Dates: 08 October 2006 - 10 May 2043
P.O. Box 462, 7689 Leo. Ave
Kawerau, North Island 1505

Policy Amount: \$2,927.00 Deductible: \$250.00 Out of Pocket Max: \$1,000.00

DEPENDENTS

	First Name	Date of Birth
Knox		04 October 2014
Martha		02 May 2014
		Page Summary
		Dependents

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