**Insurance Plan Avail Reciept**

Patient Name : df  
  
Account Address : 0x2E6C63Dce1843378bfBB23D189A5b5DDB9a927b7  
  
Email Id : df@fgdf  
  
Insurance Plan : A  
  
Insurance Avail Date : 2022-04-22  
  
Insurance Plan Avail Amount : 5 ETH

**Insurance Company Sign**

