



Your Guaranteed Acceptance Application

Quote Details

Quote #: **W69519**

Submission Date: **January 25, 2022**

Application for Benefits

Guaranteed Acceptance Benefits

Options

Gold Health

Gold Dental

Who will be covered

Name	Birthdate	Gender	Care Card	
Carlos Ernesto C Fernandez Avila	February 25, 1994	Male	9700874338	

Contact Information

Address

UNIT 17429 - 2B AVE
SURREY, BRITISH COLUMBIA
V3Z 6R9

Phone & Email

587-501-8764 (Home Phone)

587-501-8764 (Other Phone)

carlosfernandez2594@gmail.com (Email)

Beneficiaries

Carlos Ernesto C Fernandez Avila

No beneficiaries specified. Applicable benefits will be paid to estate in the event of death.

Payment Information

Premium: \$90.00 Monthly

Credit Card Payment

Cardholder	Credit Card Number	Expiry Date
Carlos Ernesto Fernandez A	4537-****-****-6025	8 / 2022