

Hospitalization Benefit Policy

Premium Certificate for the purpose of deduction under Section 80 D of Income Tax (Amendment) Act,1986

Policy No : P/700120/04/2019/000435 **Type of Policy** : MEDI CLASS INSURANCE
Issue Office : 700120 - Telesales - Hyderabad
Address : D.No.5-35
Bheemili (M)
Visakhapatnam
Pincode _ 531163.
Tel / Fax : 7981094863
Email : madhupaluri@gmail.com

This is to certify that Mr. Madhu Paluri has paid Rs 38420 (Total Premium: Indian Rupees Thirty Eight Thousand Four Hundred Twenty Only) towards Premium for Hospitalization Insurance vide Policy No: P/700120/04/2019/000865 for the Period 21/04/2020 to 20/04/2021 renewed on 18-APR-20.

Payment received by Cheque/Credit/Debit Card vide Receipt No: 1263602656. Receipt Date: 18-APR-20

Note: - This Certificate must be surrendered to the Insurance Company for issuance of fresh Certificate in case of Cancellation of the Policy or any alteration in the Insurance affecting the Premium.

Date : 18/04/2020

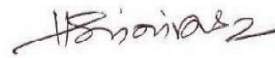
Place : Hyderabad

IRDA Regn. No 145

Corporate Identity Number U66010TN2005PLC056649

Email ID : info@starhealth.in

For and On behalf of
STAR HEALTH AND ALLIED INSURANCE CO LTD,



Authorized signatory.