

**Hospitalization Benefit Policy**

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

**Policy No** : P/700120/04/2019/000825      **Type of Policy** : MEDI CLASS INSURANCE  
**Issue Office** : 700120 - Telesales - Hyderabad  
**Address** : I.t.varam  
Pullalacheruvu (M)  
Prakasam Dist,  
Pincode \_ 523326.  
**Tel / Fax** : 9052066172  
**Email** : Anji.reddy72@ gmail.com

This is to certify that Mr. Panthangi AnjiReddy has paid Rs 24520 (Total Premium: Indian Rupees Twenty Four Thousand Five Hundred Twenty Only) towards Premium for Hospitalization Insurance vide Policy No: P/700120/04/2019/000865 for the Period 14/04/2019 to 13/04/2020 renewed on 10-APR-19.

Payment received by Cheque/Credit/Debit Card vide Receipt No: 1262802656. Receipt Date: 10-APR-19

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** : 16/04/2019

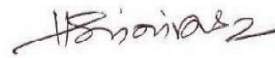
**Place** : Hyderabad

**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.**