



Contoso Insurance

Policy Holder: Carlos Welch
Policy #: WEL19WPFT9RLN
Effective Coverage Dates: 08 June 2002 - 01 July 2031
Address: 444-7468 Ipsum St.
Hamilton, NI 8355
Policy Amount: \$58,735.00
Deductible: \$1,000.00
Out of Pocket Max: \$3,000.00

DEPENDENTS

| First Name | Date of Birth |
|------------|-------------------|
| Azalia | 17 September 2007 |
| Kimberley | 17 October 1999 |

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[Dependents](#)