



# Contoso Insurance

Policy Holder: Arsenio Burch  
Policy #: BUR225UD2V8DTH  
Effective Coverage Dates: 14 September 2015 - 23 January 2024  
Address: P.O. Box 131, 4171 Non Street  
Temuka, SI 3943  
Policy Amount: \$85,840.00  
Deductible: \$1,000.00  
Out of Pocket Max: \$3,000.00

DEPENDENTS

First Name		Date of Birth
Gail		09 February 1998
		Page Summary
		Dependents