



Student Insurance

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Enrollment Payment Confirmation

Transaction Details

Transaction ID 5090892629766247803053
Time Stamp 10/27/2017 2:27:43 AM
Authorization Code 62218P
Return Code 0

Your payment was processed successfully.Your ID is: **800991399**

Please note: This coverage may not be reflected in the Claims Administrator system for up to 10 business days from your date of purchase.

[Click Here to Create an Account](#)

Policy Information

School San Jose State University
Policy 2017-2018 San Jose State Univ. - International
Term Spring/Summer 01/01/2018 08/01/2018

Student and Dependent Information

| First Name | MI | Last Name | DOB | Gender |
|------------|----|-----------|------------|--------|
| Prateek | | Sharma | 06/09/1992 | Male |

Student Details

Address 190 ryland street apartment number 1114
San Jose, CA 95110
Email Address emailprateeksharma@gmail.com
Phone 6692104719 **Gender** M
Student ID 012416144 **Student Type** INT
Home Country INDIA **Visa Type**

Plan/Pricing information

| Plan | Term | Number of Terms | Effective ¹ | Expiration | Premium |
|---------------|---------------|-----------------|------------------------|------------|----------|
| International | Spring/Summer | 1 | 01/01/2018 | 08/01/2018 | \$886.16 |

^[1]The dates of coverage are subject to verification by Wells Fargo Insurance Services - Student Insurance division.

Total Payment Amount: \$ 886.16

We have also sent an email notification to your school administrator regarding your enrollment.

[Print Payment Confirmation](#)[View Temporary ID Card](#)[Return to Home Page](#)

Thank you for your purchase. Please note that a new ID card will not be sent if you are renewing coverage.

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