

LIFE ASSURANCE –MATURITY DISCHARGE

I INDL agree that Maturity Value given below in respect of the Life Assurance Policy is the full and final settlement of the amounts payable under the policy.

I hereby give discharge for all claims under the life Insurance policy.

Policy No FAL-POL/000000089

Sum assured plus Bonus accrued/ Maturity value payable 30300

Dated _____ on this _____ day of _____

Name INDL CUSTOMER ONE

Signature of the Life Assured