INSURANCE PREMIUM ACKNOWLEDGEMENT (GROUP COPY)



We Hindustan Microfinance, hereby acknowledge the receipt of Rs. <u>/-</u> towards Insurance Premium for the Borrowers and their Guarantors of the Group <u>Matoshree</u> Branch <u>B2</u> Region <u>R1</u>. The details of payments are mentioned in the below Table.

No	NAME OF BORROWER	AGE	Name of the additional family if insured	Voter ID or Ration Card Number	Member Code	Loan Amount	Sum Assured	Ins. Pr. (for 2 Lives)
1	Vandana Mukesh Gaikwad	0[1-1-1989]			HI4000006	0.0	0.0	
2	Kashibai Laxman Gaikwad	0[1-5-1968]			HI4000009	0.0	0.0	
3	Bhagirati Ananda Sonkamble	0[1-1-1961]			HI4000010	0.0	0.0	
4	Durga Abhiman Patekar	0[1-1-1981]			HI4000007	0.0	0.0	
5	Rama Sunil Gaikwad	0[1-6-1981]			HI4000008	0.0	0.0	

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DATE:

PLACE :

Authorized Signatory
[REGIONAL MANAGER]

INSURANCE PREMIUM ACKNOWLEDGEMENT (OFFICE COPY)



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No	NAME OF BORROWER	AGE	Name of the additional family if insured	Voter ID or Aadhaar Number	Member Code	Loan Amount	Sum Assured	Ins. Pr. (for 2 Lives)
1	Vandana Mukesh Gaikwad	0[1-1-1989]			HI4000006	0.0	0.0	
2	Kashibai Laxman Gaikwad	0[1-5-1968]			HI4000009	0.0	0.0	
3	Bhagirati Ananda Sonkamble	0[1-1-1961]			HI4000010	0.0	0.0	
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5	Rama Sunil Gaikwad	0[1-6-1981]	Name of the additional family		HI4000008	0.0	0.0	Ins. Pr. (for 2
No	NAME OF BORROWER	AGE	if insured	Voter ID or Aadhaar Number	Member Code	Loan Amount	Sum Assured	Lives)

For Hindustan Microfinance

DATE :	
PLACE	:

Authorized Signatory

[REGIONAL MANAGER]