

Registered Organisation

SOPAN Samarpan Center Of Autism
1st Floor, Mumbai, Mumbai Suburban, Maharashtra-
400060

Email: snacmah@gmail.com

Contact No.: 9702871969 / 022-28328355

Please send your claim forms, which may be downloaded from www.thenationaltrust.gov.in, along with the original copies of doctor's prescription paper, fee receipt, test reports, bill of the medicine etc., to the nearest office of RAKSHA TPA or at the below mentioned address:

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RAKSHA TPA - ORIENTAL INSURANCE,

C/o Escorts Corporate Centre
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Tel No. : 01294289999
Toll Free: 18001801444

For any query regarding reimbursement of claim,
email us to: ashish.trivedi@rakshatpa.com,
ashok.narwat@rakshatpa.com

Search your claim status at www.rakshatpa.com

NIRAMAYA HEALTH CARD

Policy No.
214600/48/2020/150

Health ID No.
055665565215032019N

App. ID No.
65565215032019



NAME	Samira Lakhani
FATHER NAME	Din Mohammed Lakhani
DATE OF BIRTH	21-Nov-1990
ADDRESS	12/13 Bilal Apartment Khoja Gally, Versova Andheri(w), Mumbai, , -400061
POLICY PERIOD	01-04-2019 to 31-03-2020
RENEWAL DATE	January to February



The National Trust
for the welfare of Persons with
Autism, Cerebral Palsy, Mental
Retardation & Multiple
Disabilities
Ministry of Social Justice &
Empowerment, Govt. of India
www.thenationaltrust.gov.in

