

Care Concept AG | Am Herz-Jesu-Kloster 20 | 53229 Bonn

Ms. Maite Astigarraga Delgadillo Humaita 1465 2300 Fernando de la Mora Central Paraguay

08.06.2024

Confirmation of receipt of application for policy number: E249043648

Dear Ms. Maite Astigarraga Delgadillo,

Should your application be approved, you will receive your insurance documents from us via e-mail and subsequently another e-mail in order to be able to log in to the customer portal and manage this policy there.

If our review of your application shows that we are not able to insure you at this plan rate, we will notify you accordingly.

Sincerely,

Care Concept AG

Firma: Hausanschrift: Postanschrift:

Care Concept AG Am Herz-Jesu-Kloster 20 | 53229 Bonn Telefax: +49 228 97735-35 Postfach 30 02 62 | 53182 Bonn USt-IdNr./IHK-Reg.-Nr.: DE813961035/D-KJUH-GSQI4-87

Telefon: +49 228 97735-0

Vorstand: Aufsichtsrat:

Jörg Schmidt, Dirk Günther Hans Geisberger (Vors.) E-Mail: info@care-concept.de Handelsregister: HRB 8470 I Amtsgericht Bonn

Internet: www.care-concept.de Gesellschaftssitz: Bonn

We received your application with the following details:

Important questions

Has the insured person (IP) previously been insured with us?

No

Was the IP medically insured in the country of destination before commencement of

coverage?

No

Policyholder / contract holder

Salutation

Ms.

First name

Maite

Last name

Astigarraga Delgadillo

Date of birth

10.5.1997

Information about insured person (1)

Salutation

Ms.

First name

Maite

Last name

Astigarraga Delgadillo

Nationality

Paraguay

Date of birth

10.5.1997

Information about health insurance

Insurance plan

Care Economy

Commencement of coverage

10.6.2024

Duration

31 Days

Premium Health insurance:

36.58 EUR one-off

Information about stay abroad

Place of residency before the start of the trip:

Paraguay

Country of destination:

Germany

Reason for trip abroad

besuch

Date of entry/departure date

10.6.2024

Policyholder?s address/Contact information

Street building/house no.:

Humaita 1465

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t.de Gesellschaftssitz: Bonn

Zip code City: 2300 Fernando de la Mora

Country: Paraguay

Information about payment

Payment method: Credit card/PayPal one-off

Payment amount:

Health insurance: 36.58 EUR one-off

Processing fee online payment: 3 EUR one-off

Payment amount: 39.58 EUR one-off

Additional contact information in the event of questions

Email: maite10597@gmail.com

Area code Telephone: 595 981388624

How did you find us?: person

Additional e-mail address:

kavomobil@googlemail.com

Gesellschaftssitz: Bonn

Telefon: +49 228 97735-0