

Premium Receipt

Dear MR. ABHAY MANDAL
C-2, 2ND FLOOR, B-37, CHATTARPUR ENCLAVE, PHASE- 2
SOUTH WEST DELHI
DELHI - 110074

We acknowledge the receipt of payment towards the premium of the following health insurance policy:

Policyholder Name	Mr. Abhay Mandal			Policy Number	32140218202100
Product Name	ReAssure	Plan Opted	Family Floater	Base Sum Insured	10,00,000
Policy Commencement Date [#]	28/12/2021			Policy Expiry Date	27/12/2024
Premium Calculation:					
(A) Premium (Rs.) - Base Product				48,762.00	
(B) Premium (Rs.) - Personal Accident Cover				0.00	
(C) Premium (Rs.) - Safeguard				3,657.00	
(D) Premium (Rs.) - Hospital Cash				0.00	
Underwriting Loading (Rs.)				0.00	
Total Discount (Rs.)				2,621.00	
Net Premium / Taxable value (Rs.)				49,798.00	
Integrated Goods and Service Tax (18.00 %)				8,963.64	
Central Goods and Service Tax (0.00 %)				0.00	
State/UT Goods and Service Tax (0.00 %)				0.00	
Gross Premium (Rs.)				58,762.00	

[#]Issuance of policy is subject to clearance of premium paid

Details of persons Insured:

Name of Person Insured	Age	Gender	Relationship**
Mr. Abhay Mandal	34	Male	Applicant
Mrs. Sapna .	35	Female	Spouse
Mr. Shaurya Mandal	4	Male	Son

Upon issuance of this receipt, all previously issued temporary receipts, if any, related to this policy are considered null and void. For the purpose of deduction under section 80D, the benefit shall be as per the provisions of the Income Tax Act, 1961 and any amendments made thereafter.

You may get tax benefits up to Rs. 58,762.00.subject to maximum permissible limits applicable under Income Tax Act 1961 as modified from time to time. For more details, kindly consult your tax advisor. In the event of non-realization of premium, benefits cannot be obtained against this premium receipt.

For your eligibility and deductions, please refer to provisions of Income Tax Act 1961 as modified and consult your tax consultant.