



**The New India Assurance Co. Ltd.**

Beneficiary name: **Manivasagan Namasivayam**  
 Member ID: **5035426922**  
 Employee code: **113637\_ACIS**  
 Relation: **Self**  
 Date of birth: **19-Jun-1978**  
 Primary insured: **Manivasagan Namasivayam**  
 Valid upto: **31-Dec-2019**  
 Policy holder: **Capgemini**  
 Insurer ID: **MEMBER25643**



Authorised Signatory



**MA5035426922**

**Contact number: 9036001656**

- This card is only for identification and is not an authorization to proceed with the treatment of a guarantee for payment.
- In the case of photoless identity cards issued to beneficiaries, acceptable proof of identity such as Aadhar Card/Passport/Driver License/ Ration Card / Voters ID Card / PAN Card should be presented at hospitals.
- This non-transferable identification card is valid at selected Network Hospitals & will enable Card Holder to avail cashless hospitalization only on the basis of preauthorization by Medi Assist.
- For the latest updated Network hospital list, login to [www.medibuddy.in](http://www.medibuddy.in)

**MEDI ASSIST INSURANCE TPA PRIVATE LIMITED.**

Tower D, 4th Floor, IBC Knowledge Park, 4/1, Bannerghatta Road,  
 K.M.Layout, Bengaluru, Karnataka 560029.CIN:

U85199KA1999PTC025676

Website: [www.medibuddy.in](http://www.medibuddy.in) Email: [capgemini@mediassistindia.com](mailto:capgemini@mediassistindia.com)

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**The New India Assurance Co. Ltd.**

Beneficiary name: **Valarmathi M**  
 Member ID: **5035426924**  
 Employee code: **113637\_ACIS**  
 Relation: **Spouse**  
 Date of birth: **04-Jun-1983**  
 Primary insured: **Manivasagan Namasivayam**  
 Valid upto: **31-Dec-2019**  
 Policy holder: **Capgemini**  
 Insurer ID: **MEMBER25644**



Authorised Signatory



**MA5035426924**

**Contact number: 9036001656**

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**The New India Assurance Co. Ltd.**

Beneficiary name: **Prithiv M V Manivasagan**  
 Member ID: **5036708492**  
 Employee code: **113637\_ACIS**  
 Relation: **Son**  
 Date of birth: **16-Dec-2017**  
 Primary insured: **Manivasagan Namasivayam**  
 Valid upto: **31-Dec-2019**  
 Policy holder: **Capgemini**  
 Insurer ID: **MEMBER25646**



Authorised Signatory



**MA5036708492**

**Contact number: 9036001656**

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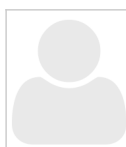
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**The New India Assurance Co. Ltd.**

Beneficiary name: **Pranav M V**  
 Member ID: **5035426923**  
 Employee code: **113637\_ACIS**  
 Relation: **Son**  
 Date of birth: **29-Dec-2010**  
 Primary insured: **Manivasagan Namasivayam**  
 Valid upto: **31-Dec-2019**



Authorised Signatory

- This card is only for identification and is not an authorization to proceed with the treatment of a guarantee for payment.
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Policy holder: Capgemini  
Insurer ID: MEMBER25645

Medi Assist  
  
Authorised Signatory



MA5035426923

Contact number: 9036001656

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