

# SAFEGUARD INSURANCE COMPANY

## Certificate of Insurance

**Policy Number:** SGI-HLT-2024-445892

**Policy Type:** Comprehensive Health Insurance

### POLICYHOLDER INFORMATION

**Name:** John Michael Davidson  
**Date of Birth:** 15-Aug-1985  
**Address:** 742 Evergreen Terrace, Springfield, IL 62701  
**Policy Holder ID:** PH-88234567

### COVERAGE PERIOD

**Effective Date:** 01-Jan-2024  
**Expiration Date:** 31/12/2024  
**Premium Due Date:** 1st of each month

### COVERAGE SUMMARY

Coverage Type	Limit	Deductible
Hospitalization	\$500,000	\$500
Outpatient Care	\$50,000	\$100
Prescription Drugs	\$25,000	\$25
Mental Health	\$30,000	\$150
Emergency Services	\$100,000	\$250

*This certificate is issued subject to the terms, conditions, and exclusions of the master policy. Please refer to your policy documents for complete details.*