



Star Health and Allied Insurance Company Limited

Tax Certificate

To

Policy Holder Name : Mr.RAVIKIRAN N
Address NO.93, 1ST FLOOR, 5TH CROSS, BALAJI NAGAR,
: BANASHANKARI 3RD STAGE, BANGALORE-560085
Bangalore
560050

Subject: Premium Certificate for the purpose of deduction under Section 80 D of Income Tax Act 1961 and any amendments made thereafter.

Dear Mr.RAVI KIRAN N

This is to certify that the company has received the premium for Health Insurance Coverage under "Health Insurance Policy" with the following details.

Policy Holder's Name :	Mr.RAVI KIRAN N	Policy No. :	P/141115/01/2022/000058
Policy Name :	Family Health Optima Insurance - 2017	Total Premium :	31925
Policy Start Date :	07/04/2023	Policy End Date :	06/04/2024
Proposer GSTIN :	-	Servicing Branch GSTIN :	29AAJCS4517L1ZU
Servicing Branch Code & Name :	141115 - Branch Office - Malleswaram Branch Office - Malleswaram	Servicing Branch Address :	No.48/2, 1st floor, 8th Main, 13th Cross, Diagonal Opp to Canara Union, Malleswaram, Bangalore-560 003

Receipt Date	Basic Premium	IGST		CGST		SGST		Total Premium
		%	Rs.	%	Rs.	%	Rs.	
02-APR-23	32608	0	0	9	2934	9	2934	38478


Financial Year	Amount
2023-2024	38478

R Margabandhu

CN=R Margabandhu
SERIALNUMBER=0082c4f7684f537e33318479d45e7b4f2861b154
7548dcdf3c2c3c26c3c9, ST=TAMIL NADU, OID 2.5.4.17=600034,
OID 2.5.4.20=51361a332c990231488a208744680e6938750806c-
8689ae1217462650a, O=UNDERWRITING, Chief Risk Officer,
O=STAR HEALTH AND ALLIED INSURANCE COMPANY, C=IN.
Date :Thu Apr 01 15:56:14 IST 2021

The Product is eligible for deduction us 80D of the Income Tax Act 1961 and any amendments made there to.

- Note:-
- 1) This certificate must be surrendered to the Insurance Company of insurance of fresh Certificate in case of Cancellation of the Policy or any alternation in the Insurance affecting the Premium.
 - 2) This Certificate is reflecting the Premium(s) Receipts cleared at the time of generating this certificate.
 - 3) The Liability of any changes in the Premium Receipt's clearing status post generating the certificate shall be upon the policy holder.

Date : 02/04/2023	For and On behalf of
Place :	Star Health and Allied Insurance Company Ltd
IRDA Regn. No 129	
Corporate Identity Number U66010TN2005PLC056649	Authorised signatory.
Email ID : info@starhealth.in	