



Policy Holder: Kaden Castaneda Policy #: CAS2945F7R5AN9

Effective Coverage Dates: 04 January 2012 - 04 September 2032 P.O. Box 603, 7528 Commodo Rd.

Address: F.O. Box 603, 752
Timaru, SI 6530
Policy Amount: \$15,847.00

Deductible: \$250.00 Out of Pocket Max: \$1,000.00

DEPENDENTS

You have no dependents to list.

1/0 04 January 2012