

### Consideration details

Assignment for a valuable ci

### Purpose of the Loan

Eintrag

(Consideration amount is mandatory)

### PARTICULARS OF THE

Name of the company

KOTAK MAHINDRA LIFE INSURANCE COMPANY LTD

**Address :-** Policy Servicing Department, 7th Floor, Kotak Infinity, Building No.21, Raheja Infinity park,  
Off Western Express Highway, Goregaon Mulund Link Road, City : Malad (East), Mumbai

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Pincode: 400043

**Phone Number (Toll Free):** 1-800-209-8800

Fax Number : 072-66200550

E-mail : chemservicedesk@katala.com

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Signature of the Assignee:  
(Please affix company stamp counter signed by  
authorized signatory)

### PARTICULARS OF THE WITNESS

Therapeutic Value of the System

100

First name

**Abstract**



City &amp; County of Denver

2000

May 2006