

Star Health and Allied Insurance Company Limited

Tax Certificate

То

Customer Name

KONDURU GANESH

Address

D.NO-20-140, NAIDU STREET,

KOTHA VALASA,Parvathipuram

535501

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

Dear Customer,

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 : | KONDURU GANESH | Policy No. : | P/613031/01/2024/000028 |
|-----------------------------------|--|-------------------------------|--|
| Policy Name : | Star Health Assure Insurance Policy | Total Premium: | 23785 |
| Policy Start Date : | 11/08/2023 | Policy End Date : | 10/08/2024 |
| Customer GSTIN: | - | Servicing Branch GSTIN : | 37AAJCS4517L1ZX |
| Customer Code: | AA0030306297 | Premium Terms : | Non-Installment |
| Servicing Branch Code & Name : | 613031 - Branch Office - Parvathipuram Branch Office - Parvathipuram | Servicing Branch Address : | 4TH FLOOR, PSN ESTATES LTB ROAD, NR. RTC COMPLEX PARVATHIPURAM, VIZIANAGARAM- 535002 |

| Receipt Date | Basic Premium | IGST | | CGST | | SGST | | Total Premium |
|--------------|---------------|------|-----|------|------|------|------|-------------------|
| | | % | Rs. | % | Rs. | % | Rs. | - Total i Tomiani |
| 11-AUG-23 | 20157 | 0 | 0 | 9 | 1814 | 9 | 1814 | 23785 |

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

| Financial Year | Amount |
|----------------|--------|
|----------------|--------|

| 2023-2024 | 23785 |
|-----------|-------|
| | |

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: 11/08/2023 For and On behalf of

Place: PARVATHIPURA Star Health and Allied Insurance Company Ltd

Q. Mosm

IRDA Regn. No 129

Corporate Identity Number L66010TN2005PLC056649

Email ID: info@starhealth.in Authorised signatory.