



**American Life Insurance Company
Limited**

MetLife Building, 18-20 Motijheel, C/A Dilkusha
Rd, Dhaka 1000

T: (880-2) 9561791

F: (880-2) 9558682

Web: www.metlife.com.bd

Group Medical Claim Form

This is filled in by the Claimant during online claim submission	
Group Policy Number:	61111
Group Policy Name:	DATA BIRD LIMITED
Certificate Number:	31
Employee Name:	ZAHANGIR AHAMMAD BHUIYAN
Patient Name:	ZAHANGIR AHAMMAD BHUIYAN
Product Type:	Out-Patient
Nature Of Sickness:	
Total Claim Amount:	2607