



**ACKNOWLEDGEMENT OF HEALTH INSURANCE CARDS**

I Sundeep Sham acknowledge and confirm that I have received my  
insurance card-Policy # 00052

EMP ID: APD-0097

NAME: Sundeep Sham

DEPARTMENT: Check Processing

CNIC #: 42301-1265245-3

SIGNATURE: \_\_\_\_\_

A handwritten signature in blue ink, appearing to be 'Sundeep Sham', written over a horizontal line.

DATE: 10-09-2019