



ACKNOWLEDGEMENT OF HEALTH INSURANCE CARDS
(2020 ~ 2021)

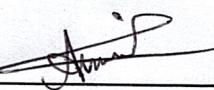
I Anil acknowledge and confirm that I have received my insurance card-Policy # 21-000000101917-00152

EMP ID: APD-0243

NAME: Anil

DEPARTMENT: Administration

CNIC #: 42301-0987213-3

SIGNATURE: 

DATE: 05/11/20