



V - PERSONAL ACCIDENT - PACKAGES

CONFIDENCE INSURANCE GROUP s.a.l

PACKAGE 1 (IN US \$)	PLAN A	PLAN B	PLAN C	PLAN D	PACKAGE 2 (IN US \$)	PLAN A	PLAN B	PLAN C	PLAN D
	OCCUPATIONAL CLASSES PREMIUM					OCCUPATIONAL CLASSES PREMIUM			
BASIC CONTRACT	SUM ASSURED				BASIC CONTRACT	SUM ASSURED			
Accidental Death (AD)	25,000	25,000	25,000	25,000	Accidental Death (AD)	50,000	50,000	50,000	50,000
Permanent Total Disability (PTD)									
Permanent Partial Disability (PPD)									
SUPPLEMENTARY CONTRACTS	SUM ASSURED				SUPPLEMENTARY CONTRACTS	SUM ASSURED			
Weekly Indemnity (WI) (Elimination Period 1 Week)	87.50	87.50	87.50	87.50	Weekly Indemnity (WI) (Elimination Period 1 Week)	175	175	175	175
MEDICAL EXPENSES	SUM ASSURED				MEDICAL EXPENSES	SUM ASSURED			
	1,500	1,500	1,500	1,500		2,500	2,500	2,500	2,500
TOTAL PREMIUM	110	165	240	REF. TO HEAD OFFICE	TOTAL PREMIUM	200	285	415	REF. TO HEAD OFFICE

