



CignaTTK Health Insurance Company Limited
 401/402, Raheja Titanium, Western Express Highway,
 Goregaon (East), Mumbai - 400 063.
 Telephone : +91 22 6170 3600
 Fax No : +91 22 6170 3689

CORPORATE ACTION INFORMATION FORM

(For Debt instruments - Allotment)

Ref. No.:

Date: 24th April 2017

National Securities Depository Limited
 Trade World, A Wing
 Kamala Mills Compound, Lower Parel
 Mumbai – 400013.

We wish to execute corporate action to **credit** the following securities to the accounts in NSDL. The details of the securities allotted are given below:

ISIN	INE790W08017
Security Description	9% Unsecured Redeemable Non-Convertible Debentures.
Allotment Date	31 st March 2017
Face Value per security	Rs. 10,00,000
Distinctive Numbers	1 to 430

<i>Allotment Details</i>	<i>No. of records</i>	<i>No. of Securities (Quantity)</i>
Electronic Form – NSDL	1	430
Electronic Form – CDSL	-	-
Physical Form	-	-
<i>Total Allotted</i>	1	430

I, Mr. Sameer Bhatnagar, Head-Legal, Secretarial & Chief Compliance Officer of CignaTTK Health Insurance Company Limited declare that the issuer has obtained all the necessary approvals for the aforesaid issue of securities. The allotment is in terms of Board Resolution dated 30th March 2017 approved on 31st March 2017 (*copy enclosed / copy already submitted to NSDL on vide letter dated _____.*)

Signature:

Notes:

1. Enclose a copy of the Board Resolution for allotment of the above securities.
2. Ensure that the above details reach NSDL at least two days before execution of corporate action.
3. The form should be signed by the Company Secretary or Compliance Officer or Managing Director.
4. After submitting the Corporate Action Information Form and payment of fees to NSDL, you may advise your R & T Agent / Registry Division to execute the corporate action.



MINISTRY OF CORPORATE AFFAIRS
RECEIPT
G.A.R.7

SRN : G41188285

Service Request Date : 18/04/2017

Payment made into : ICICI Bank

Received From :

Name : PRAMOD SHANTILAL SHAH
Address : 3/11, Kotak Kunj,
K.M.Munshi Marg, 36, Chowpatty Road,
Mumbai, Maharashtra
India - 400007

Entity on whose behalf money is paid

CIN: U66000MH2012PLC227948
Name : CIGNATK HEALTH INSURANCE COMPANY LIMITED
Address : 401/402, 4th Floor, Raheja Titanium,
Western Express Highway, Goregaon(East)
MUMBAI, Maharashtra
India - 400063

Full Particulars of Remittance

Service Type: eFiling

Service Description	Type of Fee	Amount(Rs.)
Fee For Form PAS-3	Normal	600.00
Total		600.00

Mode of Payment: Credit Card- ICICI Bank

Received Payment Rupees: Six Hundred Only

Note –The Registrar may examine this eForm any time after the same is processed by the system under Straight Through Process (STP). In case any defects or incompleteness in any respect is noticed by the Registrar , then this eForm shall be treated and labeled as defective and the eForm shall have to be filed afresh with the fee and additional fee, as applicable. (Please refer Rule 10 of the Companies (Registration offices offices and Fees) Rules, 2014)

TRUE COPY

For Cigna TTK Health Insurance Company Limited

Sandeep Patel
Sandeep Patel
Managing Director & CEO



FORM NO. PAS-3



Return of Allotment

[Pursuant to section 39(4) and 42 (9) of the Companies Act, 2013 and rule 12 and 14 Companies (Prospectus and Allotment of Securities) Rules, 2014]

Form language English Hindi

Refer the instruction kit for filing the form.

1.(a) *Corporate Identity Number (CIN) of company

U66000MH2012PLC227948

Pre-fill

(b) Global Location Number (GLN) of Company

2.(a) Name of the company

CIGNATTK HEALTH INSURANCE COMPANY LIMITED

(b) Address of the Registered office of the company

401/402, 4th Floor, Raheja Titanium,
Western Express Highway, Goregaon(East)
MUMBAI
Mumbai City
Maharashtra
400063

(c) *Email Id of the company

Sameer.Bhatnagar@cignattnk.in

3. Securities allotted payable in cash

*Number of allotments

1

1 (i)* Date of allotment

31/03/2017

(DD/MM/YYYY)

(ii)(a) Date of passing shareholders' resolution

09/08/2016

(DD/MM/YYYY)

(b) SRN of Form No. MGT-14

G21710918

Particulars	<input type="checkbox"/> Preference shares	<input type="checkbox"/> Equity shares without Differential rights	<input type="checkbox"/> Equity Shares with differential rights	<input checked="" type="checkbox"/> Debentures
Brief particulars of terms and conditions				Redeemable non-convertible unsecured
Number of securities allotted				430
Nominal amount per security (in Rs.)				1000000.00
Total nominal amount (in Rs.)				430,000,000
Amount paid per security on application (excluding premium) (in Rs.)				1000000.00
Total amount paid on application (excluding premium) (in Rs.)				430,000,000
Amount due and payable on per security on allotment(excluding premium) (in Rs.)				0.00
Total amount paid on allotment (excluding premium) (in Rs.)				0.00
Premium amount per security due and payable (if any) (in Rs.)				0.00
Total premium amount due and payable (if any) (in Rs.)				0.00
Premium amount paid per security (if any)				0.00
Total premium amount paid (if any) (in Rs.)				0.00
Amount of discount per security (if any) (in Rs.)				0.00
Total discount amount (if any) (in Rs.)				0.00
Amount to be paid on calls per security (if any) (excluding premium) (in Rs.)				0.00
Total amount to be paid on calls (if any) (excluding premium) (in Rs.)				0.00

TRUE COPY

For CignaTTK Health Insurance Company Limited

Sandeep Patel
Managing Director & CEO

4. Securities allotted for consideration other than cash

* Number of allotments

(i)* Date of allotment (DD/MM/YYYY)

(ii)(a) Date of passing shareholders' resolution (DD/MM/YYYY)

(b) SRN of Form No. MGT-14

Particulars	<input type="checkbox"/> Preference shares	<input type="checkbox"/> Equity shares without Differential rights	<input type="checkbox"/> Equity Shares with differential rights	<input type="checkbox"/> Debentures
Number of securities allotted				
Nominal amount per security (in Rs.)				
Total nominal amount (in Rs.)				
Amount to be treated as paid up on each security (in Rs.)				
Premium amount per security (if any) (in Rs.)				
Total premium amount (if any) (in Rs.)				
Amount of discount per security (if any) (in Rs.)				
Total discount amount (if any) (in Rs.)				

(iv)* Details of consideration

Consideration for which such securities have been allotted	Description of the consideration	Value (amount in Rs.)
(a) Property and assets acquired		
(b) Goodwill		
(c) Services (give nature of services)		
(d) Conversion of Debentures		
(e) Conversion of Loans		
(f) Other items (to be specified)		

(v)* Whether an agreement or contract is executed in writing for allotting securities for consideration other than cash (if yes, attach a copy of such agreement or contract). Yes No

(vi) Whether valuation report of the Valuated person has been obtained. Yes No



Managing Director & CEO
Sandeep Patel

5. Bonus shares issued

(a) Date of allotment	<input type="text"/>	(DD/MM/YYYY)
(b) Number of bonus shares	<input type="text"/>	
(c) Nominal amount per share (in Rs.)	<input type="text"/>	
(d) Amount to be treated as paid up per share (in Rs.)	<input type="text"/>	
(e) * Date of passing shareholders' resolution	<input type="text"/>	(DD/MM/YYYY)
(f) * SRN of Form No MGT-14	<input type="text"/>	

6. In respect of private placement

(a) Category to whom allotment is made:

- Existing shareholders
 Employee
 Directors
 Qualified Institutional Buyers
 Others

(b) Declaration that in respect of preferential allotment or private placement the company has:

- allotted securities to less than two hundred persons in aggregate in a financial year excluding exempted categories;
 not allotted securities with an application size of less than twenty thousand per person;
 offered such securities through private placement offer letter and no prospectus or any other public advertisement has been issued for the same;
 completed allotment in respect of earlier private placement offers;
 received money payable on subscription of such securities through cheque or demand draft or other banking channels but not in cash;
 made such offers only to the persons whose names were recorded by the company prior to such invitation and such persons have received such offer by name;
 Maintained a complete record of such offers and acceptances in Form No. PAS-5.

7.* Capital structure of the company after taking into consideration the above allotment(s) of shares:

Particulars	Authorized capital of the company	Issued capital of the company	Subscribed capital	Paid up capital
Number of equity shares	300,000,000	251,365,062	251,365,062	251,365,062
Nominal amount per equity share	10	10	10	10
Total amount of equity shares	3,000,000,000.00	2,513,650,620.00	2,513,650,620.00	2,513,650,620.00
Number of preference shares	0	0	0	0
Nominal value per preference share				
Total amount of preference shares				
Unclassified shares				
Total amount of unclassified shares (in Rs.)				
Total	3,000,000,000.00	2,513,650,620.00	2,513,650,620.00	2,513,650,620.00



8.* Debt Structure of the company after taking into consideration the above allotment(s) of debentures/ other security:

Particulars	Total number of securities	Nominal value per unit of security	Total amount
Debentures	430	1000000	430,000,000
Secured loans			0
Others, specify	0	0	0

9.* Whether complete list of allottees has been enclosed as an attachment. Yes No
 In case No, then submit the details of all the allottees in a CD separately.

Attachments

List of attachments

1.* List of allottees. Attach separate list for each allotment (refer instruction kit for format). If not attached, then it shall be submitted separately in a CD.

Attach

PAS_5_debenture.pdf
 List of Allottees.pdf
CTC_Allotment of Debenture.pdf

2.* Copy of Board or shareholders' resolution.

Attach

6. Complete record of private placement offers and acceptances in Form PAS-5.

Attach

Remove attachment

7. Optional attachment(s), if any.

Attach



Declaration

I am authorized by the Board of Directors of the Company vide resolution no * 36 dated * 05/05/2014 to sign this form and declare that all the requirements of Companies Act, 2013 and the rules made thereunder in respect of the subject matter of this form and matters incidental thereto have been complied with. Whatever is stated in this form and in the attachments thereto is true, correct and complete and no information material to the subject matter of this form has been suppressed or concealed and is as per the original records maintained by the promoters subscribing to the Memorandum of Association and Articles of Association.

It is further declared and verified that:

- 1. All the required attachments have been completely, correctly and legibly attached to this form.
- 2. The list of allottees is correct and complete as per records of the company.
- 3. Where the securities are issued other than cash, the contract as well as list of allottees and any other contract of sale, or a contract for services or other consideration in respect of which that allotment is made is attached herewith. If not, then an attachment has been attached by the company mentioning all the particulars of the contract in writing.

*** To be digitally signed by**

* Designation



* Director identification number of the director; OR
DIN or PAN of the manager or CEO or CFO; or
Membership number of the Company Secretary

Certificate by practicing professional

I declare that I have been duly engaged for the purpose of certification of this form. It is hereby certified that I have gone through the provisions of the Companies Act, 2013 and rules thereunder for the subject matter of this form and matters incidental thereto and I have verified the above particulars (including attachment(s)) from the original/certified records maintained by the Company/applicant which is subject matter of this form and found them to be true, correct and complete and no information material to this form has been suppressed. I further certify that:

- i. The said records have been properly prepared, signed by the required officers of the Company and maintained as per the relevant provisions of the Companies Act, 2013 and were found to be in order;
- ii. All the required attachments have been completely and legibly attached to this form.

*** To be digitally signed by**



- * Chartered accountant (in whole-time practice) or Cost accountant (in whole-time practice) or
- Company secretary (in whole-time practice)

* Whether associate or fellow Associate Fellow

* Membership number

* Certificate of practice number

Note: Attention is drawn to provisions of Section 448 of the Companies Act, 2013 which provide for punishment for false statement and certification.

Modify

Check Form

Prescrutiny

Submit

This eForm has been taken on file maintained by the registrar of companies through electronic mode and on the basis of statement of correctness given by the filing company.





CignaTTK Health Insurance Company Limited
 401/402, Raheja Titanium, Western Express Highway,
 Goregaon (East), Mumbai - 400 063.
 Telephone : +91 22 6170 3600
 Fax No : +91 22 6170 3689

CERTIFIED TRUE COPY OF THE RESOLUTION APPROVED BY THE BOARD OF DIRECTORS OF CignaTTK HEALTH INSURANCE COMPANY LIMITED THROUGH CIRCULATION ON 31ST MARCH 2017

Allotment of Debentures to Cigna Apac Holdings, Limited:

“RESOLVED THAT pursuant to the provisions of Section 42(6) of the Companies Act, 2013 (the Act) read with the Companies (Prospectus and Allotment of Securities) Rules, 2014 and any other applicable provisions of the Act and rules made thereunder and pursuant to the provisions of the Insurance Regulatory and Development Authority of India (Other Forms of Capital) Regulations, 2015, the Foreign Exchange Management Act, 1999, the circulars and notifications issued by the Reserve Bank of India (RBI), and in accordance with such other applicable acts, rules and regulations, if any and in accordance with the approval of the Insurance Regulatory and Development Authority of India (IRDAI) dated 13th January 2017 and in accordance with the Debenture Subscription Agreement dated 21st March 2017 executed between CignaTTK Health Insurance Company Limited and Cigna Apac Holdings, Limited, the consent of the Board be and is hereby accorded to allot 430 redeemable non-convertible unsecured debentures of face value of INR 10,00,000 (Indian Rupees Ten Lakhs) each amounting to INR 43,00,00,000 (Indian Rupees Forty Three Crores) to Cigna Apac Holdings, Limited in Dematerialised form;

RESOLVED FURTHER THAT any Director(s), Mr. Sameer Bhatnagar, Head Legal, Secretarial & Chief Compliance Officer and Mr. Jigar Shah, Company Secretary of the Company, be and are hereby authorized, jointly and severally, to intimate above allotment to Depositories and/or Registrar and Transfer Agents and submit necessary documents and file necessary forms and returns as may be required to give effect to this resolution;

RESOLVED FURTHER THAT any Director(s), Mr. Sameer Bhatnagar, Head Legal, Secretarial & Chief Compliance Officer and Mr. Jigar Shah, Company Secretary of the Company, be and are hereby authorised, jointly and severally, to file a return of allotment with regard to the aforesaid Debentures so allotted, as required under Section 42(9) of the Act read with the Companies (Prospectus and Allotment of Securities) Rules, 2014 with the Registrar of Companies, Mumbai and to do all such acts, deeds and things as may be necessary to give effect to the aforesaid resolution.”

For CignaTTK Health Insurance Company Limited

Sandeep Patel
Managing Director & CEO
DIN.: 03210271

Address: 7th and 8th Floor of Unit 3, Narain Terraces, Pali Hill, Village Bandra, Bandra-W, Mumbai - 400050

Date:- 12th April 2017
Place:- Mumbai





CignaTTK Health Insurance Company Limited
 401/402, Raheja Titanium, Western Express Highway,
 Goregaon (East), Mumbai - 400 063.
 Telephone : +91 22 6170 3600
 Fax No : +91 22 6170 3689

List of Allottees

Table A

Name of the Company	CignaTTK Health Insurance Company Limited
Date of allotment	31/03/2017
Type of Debenture allotted	9% Unsecured Redeemable Non-Convertible Debentures
Nominal Amount per security (in Rs.)	Rs. 10,00,000 per debenture
Premium/ (Discount) amount per security (in Rs.)	NIL
Total number of allottees	1
Brief particulars in respect of terms and condition, voting rights etc.	Refer Annexure 1



Table B

Sr. No.	Name & Occupation of Allottee	Address of Allottee	Nationality of the Allottee	Number of Debentures allotted	Total amount paid (including premium) (in Rs.)	Total amount to be paid on calls (including premium) outstanding (in Rs.)
2	Cigna Apac Holdings Limited Occupation: Business Permanent Account Number: N.A E-mail ID: martin.richardson@conyersdill.com	Clarendon House, 2 Church Street, PO Box HM 1022, Hamilton, HM DX, Bermuda	Bermuda	430	43,00,00,000	NIL
		TOTAL		430	43,00,00,000	NIL

For CignaTTK Health Insurance Company Limited

Sandeep Patel
 Managing Director & CEO
 DIN.: 03210271
 Address: 7th and 8th Floor of Unit 3, Narain Terraces,
 Pali Hill, Village Bandra, Bandra-W, Mumbai - 400050



Date:- 12th April 2017
 Place:- Mumbai

ANNEXURE I
TERMS AND CONDITIONS OF THE DEBENTURES

SR NO	PARTICULARS	TERMS AND CONDITIONS
1.	Issuer	CignaTTK Health Insurance Company Limited
2.	Subscriber	Cigna APAC Holdings, Ltd.
3.	Face value per Debenture	INR1,000,000 (Indian Rupees Ten Lakhs)
4.	Issue price	Issuance at par without any premium
5.	Subscription Amount	INR 430,000,000 (Indian Rupees Forty Three Crores)
6.	Description of the Debentures	Four hundred and thirty (430) Debentures in dematerialized form. Each Debenture shall be fully paid-up, redeemable, unsecured and non-convertible.
7.	Depositories	NSDL/CDSL
8.	Tenor/Maturity	Ten (10) years
9.	Mode of issue	Private placement
10.	Currency of borrowing through the Subscription	Indian Rupees
11.	Coupon type	Fixed rate
12.	Coupon rate	9 percent per annum
13.	Business Days for INR	Mumbai
14.	Business Day Convention	Modified Following - In case any principal/interest repayment date is a holiday, the payment takes place on the next working day; except in case of a month-end, when the payment would take place on the previous working day.
15.	Calculation Agent:	As mutually agreed between the Parties.
16.	Day count basis	Actual/Actual, i.e., Actual/365 days (or 366 days in the case of a leap year)
17.	Coupon Payment Frequency	Interest payable annually (net of withholding, if any) on each Coupon payment due date subsequent to the date of allotment of the debentures up to the date of redemption of the debentures and on the redemption date, subject to conditions mentioned 20 below.
18.	Annual Coupon date	Coupon date shall be 31 March of every financial year or redemption date (in the event of redemption), as applicable.
19.	Coupon payment due date	Coupon payment shall be settled in cash (net of withholding, if any) within thirty (30) days of the annual coupon date.

TRUE COPY

For CignaTTK Health Insurance Company Limited

Sandeep Patel
Managing Director & CEO



2055

20.	Conditions subject to which Interest is payable	<p>Annual interest payable by the Company shall be subject to the following:</p> <p>i. No Interest shall be payable by the Company to the Subscriber if the Company's solvency margin falls below the minimum regulatory requirement prescribed by the IRDAI or if the impact of such interest payment would result in the Company's solvency falling below or remaining below the minimum requirement specified by the IRDAI.</p> <p>Any coupon interest lost in a year on account of failure of the Company to meet this condition shall not be cumulated.</p> <p>ii. In the event where the Company has insufficient earnings, to pay the whole or any part of the Coupon interest, as per its financial statements as on March 31 preceding each Coupon payment date, or in the event of redemption as on the redemption date, interest shall be accrued and paid by the Company subject to prior IRDAI approval.</p> <p>Further, the interest amount due and remaining unpaid may be compounded in accordance with the coupon rate of the subordinated debt and paid in subsequent financial years in accordance with the IRDAI (Other Forms of Capital) Regulations, 2015.</p> <p>iii. For the purposes of determining the sufficiency of earnings, the Company will consider its annual profits before Interest and tax as per its financial statements as on March 31 preceding each Coupon payment date</p>
21.	Mode of payment of subscription monies	Remittance to a separate bank account maintained by the Company through normal banking channels.
22.	Use of proceeds	Running health insurance business and meeting working capital requirements as well as satisfying applicable solvency margin requirements of the Company.
23.	Redemption and redemption schedule	Redemption to be at par without any premium and shall be as per Annexure II to the Debenture Subscription Agreement.
24.	Pre-payment/Premature redemption/ Call option	The Company, subject to approval of its board of directors, shall have the right (but not the obligation) to call for pre-payment and purchase the Debentures from the Subscriber any time after completion of five (5) years from the Closing Date.
25.	Seniority of claims	The claims of the Subscriber under the Debentures and/or this Agreement shall be superior to the claims of the investors in preference shares and equity shares and shall be subordinate to the claims of policyholders and all other creditors of the Company.
26.	Taxes, duties, cost and expenses	Relevant taxes, duties and levies shall be borne by the Company. However, interest payments would be made after deducting withholdings taxes, as per Applicable Law.
27.	Other Terms	<p>(a) The total quantum of the Debentures taken together shall not exceed 25% of the total of paid-up equity share capital and securities premium of the Company at any point in time.</p> <p>(b) No loan would be granted against the security of the Debenture issued under the Agreement.</p>

TRUE COPY

Prudential Health Insurance Company Limited



**ANNEXURE II
REPAYMENT SCHEDULE**

The repayment terms shall be as follows:

The Debentures shall be redeemed at par without any premium on the date of its maturity i.e. on expiry of 10 years.



Be JST

Deutsche Bank



Deutsche Bank House, Hazarimal Somani Marg, Fort,
Mumbai 400 001 (India)
IFSC Code : DEUT0784BBY
Payable at par at all Deutsche Bank branches in India

27 04 2017
D D M M Y Y Y Y

या धारक को OR-BEARER

PAY National Securities Depository Limited
रुपये RUPEES Two thousand three hundred only

A/c. No. 0646695002

अदा करें ₹ 2300/=

For CIGNATTK HEALTH INSURANCE CO LTD

[Signature]
Vikas Goyal

Authorised Signatories
Please sign above

Valid for three months from the date of issue of the cheque

⑈017935⑈ 400200002⑈ 064669⑈ 29

BANG DATA FORMS PVT LTD. CTS 2010

THE UNIVERSITY OF CHICAGO
LIBRARY

UNIVERSITY OF CHICAGO
LIBRARY

UNIVERSITY OF CHICAGO
LIBRARY

THE UNIVERSITY OF CHICAGO
LIBRARY

UNIVERSITY OF CHICAGO
LIBRARY

UNIVERSITY OF CHICAGO
LIBRARY

UNIVERSITY OF CHICAGO
LIBRARY