

196037477  
CORN SOCK  
1 NOKWE AVE  
UMHLANGA  
4051

2026/03/05  
Letter Ref: 540283813  
Member Number: 196037477

Dear Berry Sock

## CERTIFICATE OF MEMBERSHIP

This document serves as confirmation of membership for the dependant listed below.

### Member information

<b>Member</b>	Corn FS Sock	<b>Membership number</b>	196037477
<b>Effective date</b>	2026/07/01	<b>Date of issue</b>	2026/03/05

### Dependant information

<b>Name and surname</b>	Berry Sock	<b>Beneficiary number</b>	05
<b>Date of birth</b>	2004/05/13	<b>ID / Passport number</b>	0405130000000
<b>Join date</b>	2026/03/01	<b>Benefit date</b>	2026/06/01
<b>General waiting period</b>	Yes	<b>Termination date</b>	2026/06/30

### Condition specific waiting period(s)

<b>Condition</b>	<b>Effective date</b>	<b>End date</b>
Abdominal Hernia And Its Treatment And Complications	2026/03/01	2027/02/28

### Late joiner penalty (LJP)

No late joiner penalty applicable.

### Disclaimer

The information in this document is correct as of the date of issue.

Personally Yours,

Glenfield Office Park, 361 Oberon Avenue, Faerie Glen, Pretoria, Gauteng, 0081 | PO Box 2297, Arcadia, Pretoria, Gauteng, 0001  
Client service 086 000 2378 | Fax +27 (0)12 472 6500 | E-mail [service@bestmed.co.za](mailto:service@bestmed.co.za) | [www.bestmed.co.za](http://www.bestmed.co.za)

**Bestmed Medical Scheme**  
Membership Department