run:

----------------------------------------------------------------------------------

------- Welcome to World Insurance Company -------

----------------------------------------------------------------------------------

| 1 : Information about insurance types |

| 2 : Be a member of World Insurance Company (Appointment or Pay Bill ) |

| 3 : Submit customer claim or complaint |

| 4 : Exit |

--------------------------------------------------------------------------------

> Please enter your choice: 1

------- SERVICES -------

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| L or l : Life Insurance |

| H or h : Health Insurance |

| C or c : Car Insurance |

| R or r : Return to Main Menu |

---------------------------------

> Please enter the choice: l

----------- Life Insurance-----------

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| S or s: Saudi Arabia Only |

| G or g: Gulf Countries |

| W or w: World Wide |

| P or p: Previous Menu |

-------------------------------------

> Please enter the choice: s

AnnualCost:10000.0

MonthlyCost 1000.00 :

Needed Number of Days to be settled:10

----------- Life Insurance-----------

--------------------------------------

| S or s: Saudi Arabia Only |

| G or g: Gulf Countries |

| W or w: World Wide |

| P or p: Previous Menu |

-------------------------------------

> Please enter the choice: p

------- SERVICES -------

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| L or l : Life Insurance |

| H or h : Health Insurance |

| C or c : Car Insurance |

| R or r : Return to Main Menu |

---------------------------------

> Please enter the choice: h

---------- Health Insurance -------

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| N or n: New Membership |

| R or r: Renew Membership |

| P or p: Previous Menu |

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> Please enter the choice: n

AnnualCost:3000.0

MonthlyCost 300.00 :

Needed Number of Days to be settled:5

---------- Health Insurance -------

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| N or n: New Membership |

| R or r: Renew Membership |

| P or p: Previous Menu |

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> Please enter the choice: p

------- SERVICES -------

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| L or l : Life Insurance |

| H or h : Health Insurance |

| C or c : Car Insurance |

| R or r : Return to Main Menu |

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> Please enter the choice: c

------------- Car Insurance-------------

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| FC: Fully comprehensive |

| TPft: Third-party, fire and theft |

| TP: Third party |

| PR: Previous Menu |

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> Please enter the choice: fc

AnnualCost:4000.0

MonthlyCost 400.00 :

Needed Number of Days to be settled:1

------------- Car Insurance-------------

-----------------------------------------

| FC: Fully comprehensive |

| TPft: Third-party, fire and theft |

| TP: Third party |

| PR: Previous Menu |

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> Please enter the choice: pr

------- SERVICES -------

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| L or l : Life Insurance |

| H or h : Health Insurance |

| C or c : Car Insurance |

| R or r : Return to Main Menu |

---------------------------------

> Please enter the choice: r

----------------------------------------------------------------------------------

------- Welcome to World Insurance Company -------

----------------------------------------------------------------------------------

| 1 : Information about insurance types |

| 2 : Be a member of World Insurance Company (Appointment or Pay Bill ) |

| 3 : Submit customer claim or complaint |

| 4 : Exit |

--------------------------------------------------------------------------------

> Please enter your choice: 2

------- SERVICES -------

-----------------------------------

| L or l : Life Insurance |

| H or h : Health Insurance |

| C or c : Car Insurance |

| R or r : Return to Main Menu |

---------------------------------

> Please enter the choice: l

--------------- Request Membership ------------------

------------------------------------------------------

| 1: Via world insurance company representative |

| 2: Pay insurance fee |

| 3: Previous Menu |

----------------------------------------------------

> Please enter the choice: 2

> Enter your name (first and last): Ali Ahmed

> Enter your mobile (##-###-####): 22-333-4444

> Enter type of the insurance Life or Health or Car name: Health

> Enter the description service of the selected insurance type : New Membership

> Method of payment Monthly or Annually : Monthly

> When do you want your to start your Membership service : 30-03-2020

> Enter number of quantities of this service you want: 1

> Please enter the cost of the selcted type insurance: 300

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| Yor request was received; you will be contacted within 24 hours to finalize it. |

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Here is a confirmation of your request to LIFE INSURANCE:

The confirmation of the type insurance and the amount you have paid

Name: Ali Ahmed Phone: 22-333-4444

the starting date of the membership: 30-03-2020

Preferred payment method monthly or annually Monthly

The amount you have paid is: 300.0

\*\*You will now be returned to the Membership Menu.

--------------- Request Membership ------------------

------------------------------------------------------

| 1: Via world insurance company representative |

| 2: Pay insurance fee |

| 3: Previous Menu |

----------------------------------------------------

> Please enter the choice: 3

------- SERVICES -------

-----------------------------------

| L or l : Life Insurance |

| H or h : Health Insurance |

| C or c : Car Insurance |

| R or r : Return to Main Menu |

---------------------------------

> Please enter the choice: r

----------------------------------------------------------------------------------

------- Welcome to World Insurance Company -------

----------------------------------------------------------------------------------

| 1 : Information about insurance types |

| 2 : Be a member of World Insurance Company (Appointment or Pay Bill ) |

| 3 : Submit customer claim or complaint |

| 4 : Exit |

--------------------------------------------------------------------------------

> Please enter your choice: 3

------- SERVICES -------

-----------------------------------

| L or l : Life Insurance |

| H or h : Health Insurance |

| C or c : Car Insurance |

| R or r : Return to Main Menu |

---------------------------------

> Please enter the choice: h

------ CLAIM/COMPLAINT ------

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| 1: Submit Claim |

| 2: Submit Complaint |

| 3: Previous Menu |

-----------------------------------

> Please enter the choice: 1

> Enter your name (first and last): Ali Ahmed

> Enter your mobile (##-###-####): 22-333-4444

> Enter your claim (on one line only): I claim 100 ryial for the cost of the medicine as the card was not accepted from the pharmacy

--------------------------------------------------------------------------------------

| Your Claim / Complaint was submitted successfully; you will contact you shortly. |

-------------------------------------------------------------------------------------

Here is a confirmation of your submission to HEALTH INSURANCE:

Submission Type: claim

Name: Ali Ahmed Phone: 22-333-4444

Claim:

"I claim 100 ryial for the cost of the medicine as the card was not accepted from the pharmacy "

\*\*You will now be returned to the Claim and Complaint Menu.

------ CLAIM/COMPLAINT ------

-------------------------------------

| 1: Submit Claim |

| 2: Submit Complaint |

| 3: Previous Menu |

-----------------------------------

> Please enter the choice: 3

------- SERVICES -------

-----------------------------------

| L or l : Life Insurance |

| H or h : Health Insurance |

| C or c : Car Insurance |

| R or r : Return to Main Menu |

---------------------------------

> Please enter the choice: r

----------------------------------------------------------------------------------

------- Welcome to World Insurance Company -------

----------------------------------------------------------------------------------

| 1 : Information about insurance types |

| 2 : Be a member of World Insurance Company (Appointment or Pay Bill ) |

| 3 : Submit customer claim or complaint |

| 4 : Exit |

--------------------------------------------------------------------------------

> Please enter your choice: 4

\*\*\* SUMMARY Activity for

World Insurance Company:

Insurance Type # query for Insurance # of request Memebership # of Claim & Complaintl

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Life 1 1 0

Health 1 0 1

Car 1 0 0

BUILD SUCCESSFUL (total time: 8 minutes 29 seconds)