**INVOICE**

**Date: {InvDate}**

**Invoice Number: {InvNumber}**

**{InvClient}**

**Attention: {InvTitle}**

**PROVISIONAL {InvPaymentPeriod} PREMIUM FOR THE {InvStartYear}/{InvEndYear} POLICY PERIOD**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **PLAN** | **TYPE** | **ANNUAL RATE (#)** | **COUNT** | **AMOUNT (#)** |

|  |  |  |
| --- | --- | --- |
|  | **Subtotal** |  |
| **1% NHIS fee** |  |
| **TOTAL** |  |

***Payment Details:***

*Bank: UBA PLC*

*Bank: UBA PLC*

*Account Name: Avon Healthcare Limited*

*Account Number:* 1017738836

A close-up of a signature

AI-generated content may be incorrect.



|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Opeoluwa Adeola** |  |  |  |  |  | **Adigwe Emmanuel P.** |
| Acting Head, Customer Experience |  |  |  |  |  | Client Manager (Retail/SME) |
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