P.no: OHFGIF(1=)

OCCIDENTAL INSURANCE

OG JAN 2024

		RISK/DEBIT	NOTE	OFPARTMENT
INSURED	SANJAY B PATEL C/O MAR			DEPARTUENT
NAME	P O BOX 42440-00100			ONTME
CLASS OF	GOLFERS/SPORTSMAN			POLICY NO.
POLICY	/			/
ERIOD	1ST JANUARY 2024	то	31ST DECEMBER 2024	
SUMMARY OF COVER	Indemnify the insured a equipment from any ca- legal liability to third pa ground in kenya	use, personal effe	ect whilst contained in a	
INTEREST & SUM INSURED	On Golfing Equipment Third Party Liability Personal Accident Personal Effects Hole in One		150,000.00 1,000,000.00 100,000.00 20,000.00 25,000.00	
SPECIAL CLAUSES	Worldwide Cover All Risks Waiver of formal propo Hole in One	sal form	(* 08	JAN 2024
INSURERS	OCCIDENTAL INSUR	ANCE CO . LIM	AITED	
Date	Type of Risk		Basic Premium	1
8	SPORTSMAN INSUR	ANCE	PHCF Stamp Duty Total Premium	12.50

