Claim Ref.	Claim Ref. No. 197,336	Payment Voucher No. 1184	ler No. 1184	Page Page 1 of 1
Agency: DIRECT	DIRECT	Date	Date: 12-Feb-2024	
Payee: Address:	Payee: REBECCA CHITWA OPATI Address: OCCIDENTAL INSURANCE CO LTD		Bank: FINA BANK Cheque No.: 084464	
Pay Location	Pay Location: Head Office			
PIN No.:	PIN NO.: N/A VAT NO.: N/A	Inv. I	Inv. No.: N/A Inv. Date: 12-02-2024	2-02-2024
Being settler INSURED (Being settlement of: MEDICAL BILLS UNDER MEDICAL CLA INSURED OCCIDENTAL INSURANCE COMPANY LIMITED	Being settlement of: MEDICAL BILLS UNDER MEDICAL CLAIM NO. CL/MED/24/3171/24 INSURED OCCIDENTAL INSURANCE COMPANY LIMITED	.4/3171/24	Net Amount KShs.
Kshs. (in words)		THIRTEEN THOUSAND FOUR HUNDRED THREE and Cents ZERO Only	RO Only	13,403.00
Prepared b	Prepared by: JANE WAKONYO	Signature		Checked By:
	ACCOUNT HEAD	EAD	Debit	Credit
DIRECT L	DIRECT LOSS PAID-MEDICAL		13,403.00	
	CASH & BANK FINA BANK: 011-101 3475	011-101 3475		13,403.00
Cheque drawn by:	awn by:	Cheque signed by:	Cheque signed by:	d by: