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Zemen Insurance S.C.

Address: A.A S/City Bole H.No 2nd Floor 3140
Tel: 0115575464/0911575850

Receipt Order

Branch Name: Tewodros
Branch Code: TW
Type of Business: Corporate
Source of Business: Direct
Name of intermediary: Direct
Name of Insured: sadasd
Sub city: Bole Woreda: 4 House No. Vat Reg. No: Tin:
The sum of Birr: nine thousand, three hundred eighty
Period insurance from: 10/04/2024 To: 09/04/2025
Sum Insured: 15,480,000

Customer ID: 2862
Policy No: ZI/TW/FRE/0000/4/24
Claim No:

Premium Type: New

Certificate No:
Endorsement No:

Excess:

	Amount
Basic Premium:	9380.59
3rd part fund levy:	
FLOOD:	
TE:	
YC:	
TP COMO:	
TP FUND LEVY:	
EXCESS CONT/RECOVERY:	
REVENUE STAMP:	5
OTHER:	0
Sum:	
VAT 15%:	
Total:	9380.59

Being: Payment for Fire and Lightning insurance cover

Cash/Cheque No. _____ Officer Name and signature: