ዘመን ኢንሹራንስ አማ Zemen Insurance S.C.

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

Receipt Order

Officer Name and signature:

Branch Name: Merkato		
Branch Code: 13	Customer ID: 2532	
	Policy No: ZI/MR/MPR/0071/03/24	
	Claim No:	
Name of intermediary: Direct Name of Insured: dsdf		
Sub city: Nifas Silk Lafto Woreda: House No. V	at Reg. No: Tin:	
The sum of Birr: Eight thousand, six hundred sixty	9	
Period insurance from: 7/3/2024 To: 6/3/2025	Ç	
Sum Insured: 856895		
Premium Type: New		Amount
	Basic Premium:	8659.64
Certificate No:	3rd part fund levy:	0
Endorsement No:	FLOOD:	
	TE:	
Excess:	YC:	
	TP COMO:	
	TP FUND LEVY:	
	EXCESS CONT/RECOVERY:	
	REVENUE STAMP:	5
	OTHER:	
	Sum:	
	VAT 15%:	
	Total:	8664.64

Cash/Cheque No. _____