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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: CMC  
Branch Code: CM  
Type of Business: Corporate  
Source of Business: Direct  
Name of intermediary: Direct  
Name of Insured: sadasd  
Sub city: Nifas Silk Lafto Woreda: 4 House No. 55255 Vat Reg. No: Tin:  
The sum of Birr: five hundred eighty-five  
Period insurance from: 12/04/2024 To: 11/04/2025  
Sum Insured: 1,548,000

Customer ID: 2868  
Policy No: ZI/CM/FRE/0000/4/24  
Claim No:

Premium Type: New

Certificate No:  
Endorsement No:

Excess:

	Amount
Basic Premium:	585.14
3rd part fund levy:	
FLOOD:	
TE:	
YC:	
TP COMO:	
TP FUND LEVY:	
EXCESS CONT/RECOVERY:	
REVENUE STAMP:	5
OTHER:	0
Sum:	
VAT 15%:	
Total:	585.14

Being: Payment for Fire and Lightning insurance cover

Cash/Cheque No. \_\_\_\_\_ Officer Name and signature: