ዘመን ኢንሹራንስ አማ Zemen Insurance S.C.

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

Receipt Order

Branch Name: Merkato Branch Code: 13 Type of Business: Source of Business: Direct	Customer ID: 2566 Policy No: ZI/MR/MPR/0099 Claim No:	2/03/24
Name of intermediary: Direct Name of Insured: xcxcc Sub city: Yeka Woreda: House No. Vat Reg. No. The sum of Birr: Eight thousand, six hundred sixty Period insurance from: 12/3/2024 To: 11/3/2025	y-five Birr Only	
Sum Insured: 856988		Amount
Premium Type: New	Basic Premium:	8660.58
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:	8665.58
		•

Being:	
Cash/Cheque No	Officer Name and signature: