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
Dianon	radiic.	1.1C11XCCO

Branch Code: MR Customer ID: 2524

Type of Business: Corporate Policy No: ZI/MR/FRE/0000/3/24

Source of Business: Direct Claim No:

Name of intermediary: Direct Name of Insured: asdasdasd

Sub city: Yeka Woreda: 4 House No. Vat Reg. No: Tin:

The sum of Birr: fifty-one

Period insurance from: 13/03/2024 To: 12/03/2025

Sum Insured: 78,580

Premium Type: New

Certificate No: Endorsement No:

Excess:

	Amount
Basic Premium:	51.51
3rd part fund levy:	
FLOOD:	
TE:	
YC:	
TP COMO:	
TP FUND LEVY:	
EXCESS CONT/RECOVERY:	
REVENUE STAMP:	5
OTHER:	0
Sum:	
VAT 15%:	
Total:	51.51

Being: Payment for Fire and Ligh	htning insurance cover
Cash/Cheque No	Officer Name and signature: