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 Name of intermediary: Direct Name of Insured: ewefwef Sub city: Nifas Silk Lafto Woreda: House No. V The sum of Birr: One hundred sixty-six Birr Only Period insurance from: 16/3/2024 To: 15/3/2025 Sum Insured: 15470	Customer ID: 2626 Policy No: ZI/MR/MPR/0098 Claim No: Vat Reg. No: Tin:	8/03/24
Premium Type: New Certificate No: Endorsement No:		Amount
	Basic Premium:	161.25
	3rd part fund levy:	0
	FLOOD:	
	TE:	
Excess:	YC:	
	TP COMO:	
	TP FUND LEVY:	
	EXCESS CONT/RECOVERY:	
	REVENUE STAMP:	5
	OTHER:	
	Sum:	
	VAT 15%:	
	Total:	166.25
Poing		

Officer Name and signature:

Cash/Cheque No. _____