

www.kra.go.ke**Taxpayer PIN :** P052092529W**Certificate Date:** 20/06/2023**Name and Address :****MAL-MUS HEALTHCARE LIMITED**NA, WESTLANDS ESTATE, NA, Makueni District,
PO Box:520,
Postal Code:90300**Certificate Number:**

KRAMCS1345203023



**This is to confirm that MAL-MUS HEALTHCARE LIMITED,
Personal Identification Number P052092529W
has filed relevant tax returns and
paid taxes due as provided by Law.**

**This Certificate will be valid for
twelve (12) months up to 19/06/2024.**

Caveat: This certificate is issued on the basis of information available with the authority as at the certificate date mentioned above. The Authority reserves the right to withdraw the certificate if new evidence materially alters the tax compliance status of the recipient.

Disclaimer : This certificate is system Generated and therefore does not require signature. You may confirm validity of this certificate on the iTax Portal by using the TCC Checker. This certificate confirms your compliance status for a period of five years preceding the date of issue. The certificate may however be withdrawn on grounds of outstanding debt affecting periods prior to this.