

## PAYMENT ADVICE

**Alcat Logistics Services**

Street No. 11, Industrial Area

P.O. BOX: 15723 Doha Qatar

Email :



**ALCAT**  
LOGISTICS

**PAYEE NAME : LIBANO SUISSE INSURANCE COMPANY**

Paym Date: 03.09.2025

20305095

Doc.No: 2534000471

**LIBANO SUISSE INSURANCE COMPAN**

Payment Method :

**DOHA-Doha**

Exch.rate:

qatar@libano-suisse.com

Remarks: Payment for general insurance company

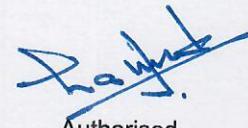
Ref. Doc. No	Posting Date	DC Type	Sup. Doc. No	Sup. Doc. Date	Currency	Doc Amount	Adjustment	Pay. Amount
2551001983	01.07.2025	RE	49648	01.07.2025	QAR	12,000.00	0.00	12,000.00
<b>Total</b>					QAR	12,000.00	0.00	12,000.00

Bank Name	A/C No.	Cheque No	Cheque Date	Currency	Amount	Remarks
DUKHAN BANK	100000841415	00005677	03 Sep 2025	QAR	12,000.00	

Amount in Words : Qatari Riyal Twelve Thousand Only

  
Created

  
Verified

  
Authorised

### Receiver's Details

Kindly Acknowledge the receipts

Name :

Signature :

### Payment Request Approvals

Pay. Req. Ref	PR Date	Creator	Level 1	Level 2	Level 3	Level 4	Level 5