**LIVESTOCK INSURANCE PROPOSAL PAYMENT.**

**Insured: {client\_name}**

**District: {district}**

**Date of claim settlement: {current\_date}**

Farmer assisted by MINAGRI through NAIS.

TYPE OF LIVESTOCK: {livestock\_type}

VALUES OF ANIMAL/SUM INSURED: {sum\_insured} Rwf

ANIMAL ID/RFID No: {rfid}

POLICY No: {police}

CLAIM No: {nsin}

PREMIUM PAID: {farmer\_contribution} Rwf paid by farmer.

DATE OF INCEPTION: {start\_date} – {end\_date}.

DATE OF STARTING TREATMENT: {date\_treatment}

DATE OF DEATH: {accident\_date}

DRUGS ADMINISTERED: {drugs}.

CAUSE OF DEATH: {circumstance}.

SALVAGE VALUE: {salvage.

DECISION NOTE: {decision}

ACCOUNT/MOBILE MONEY NUMBER: {account\_number}

ACCOUNT NAME: {account\_name}

STAFF NAME

{staff\_name}

{position}.

DATE AND SIGNATURE: