

11/18/2022



## Confirmation of Cash Deposit

### CASH DEPOSIT ADVICE

Account no and Name :

66161383840028

ALLIED HEALTH PRACTITIONERS COUNCIL OF ZIMBABWE

TELLER : Date and Time :

2022-11-18 12:17:58 PM

Amount Deposited :

USD 46.00

Reference :

2023 RENEWAL PRACTISING CERTIFICATE EMT DENNIS SHOKO A/EM0203

Teller Id and Ref :

104TBAYANA

104CHDP223220504

TELLER'S  
STAMP  
AND  
SIGNATURE  
18 NOV 2022  
VICTORIA FALLS BRANCH  
6529

TICK WHERE APPLICABLE

USD ☐ ZAR ☐ GBP ☐ EURO ☐ BWP ☐

OTHER SPECIFY

500 x				
200 x				
100 x				
50 x				
20 x				
10 x				
5 x				
2 x				
1 x				
Other				
Total:	USD 46.00			

I confirm that the amount stated on this slip is the correct amount deposited and hereby indemnify CBZ Bank Ltd from any losses arising from incorrect details. I acknowledge that the Bank shall reserve the right to reverse any transactions inconsistent with the amount stated herein.

Signature: \_\_\_\_\_