

1/30/23, 3:00 PM

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## Confirmation of Cash Deposit

### CASH DEPOSIT ADVICE

Account no and Name :

66161383840028

ALLIED HEALTH PRACTITIONERS COUNCIL OF ZIMBABWE

Date and Time :

2023-01-30 14:59:47 PM

Amount Deposited :

USD 110.001 0 000

Narrative :

Cash Deposit-EDITH MAZHINYE

Teller Id and Ref :

661TMUGWARA

661CHDP230300044



# Customer Copy

TICK WHERE APPLICABLE

USD <input checked="" type="checkbox"/>	ZAR <input type="checkbox"/>	GBP <input type="checkbox"/>	EURO <input type="checkbox"/>	BWP <input type="checkbox"/>
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OTHER SPECIFY

500 x			
200 x			
100 x			
50 x			
20 x			
10 x	6	60	
5 x			
2 x			
1 x			
Other			
Total:	110		

MUTBELL PRINTERS

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 transaction inconsistent with the amount stated herein.

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