



## Dear MISS ELLENAH MANGARA

Thank you for transacting using the CBZ Touch Funds Transfer service in respect of:

Beneficiary Customer Name ALLIED HEALTH PRACTIONERS COUNCIL O

Beneficiary Account Number 66161383840018

Amount \$62846

Date 16-Feb-2023

Narration PC renewal 2023 AT2514 Ellenah Mangara

ALLIED HEALTH PRACTIONERS COUNCIL OF

ZIMBABWE CBZ BANK REF

025FTMC230470011

**Emailed** 

For & on behalf of CBZ Bank

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