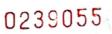


ZIMBABWE ELECTRONIC TRANSFER AND SETTLEMENT SYSTEM (ZETSS) PAYMENT FORM

	ill in blank spaces	TIMITED		
	3 2023 plete in Triplicate	RECEIVED		
MASVINGO BRANCH		2 8 MAR 2023		
Dear Sir/Madam		ANSWERED		
APPLICATION FOR ELECTRONIC TRANSFER Kindly effect the	following transfer via ZETSS;	MASYINGO		
Amount in figures (ZWL) #5109 000 — 00	THOUS HOPE NA ke			
Amount in Words ONE HUNDRED AND NINE, DOLLARS ONLY				
APPLICANT'S DETAILS Applicant's full name MAKARUKE KUMBIRAI PSY037410 Number 22-183074122				
Nature of Business/Occupation PSYCHOLOGIST				
Business Address ZOY MASVINGO				
Account Denomination RTGS				
Debit Account Number 25091095432	Branch MASVII	140		
NAME AND ADDRESS ALLIED HEALTH PRACTITIONERS COUNCIL OF ZIMBABWE				
BENEFICIARY'S BANKERS CBZ	1.1.	161383840028		
REASON FOR PAYMENT Purchase Investment Investment	Utility Bill Rent			
TRANSACTION DESCRIPTION PRACTISING RENEWAL	FOR MUNICIPALITY	KAKURC 15 10514		
For Zimra Payments Please provide the following:		in a way of		
Tax Obligation	Business Partner No			
Area Office Code				
I/We do hereby represent and declare ta First Capital Bank Limited that the above information is true and accurate in every respect. I/We undertake to retain the supporting documents and invoices for this transaction and to provide same to First Capital Bank Limited on request. I/We further understand that payments made via the ZETSS are final and irrevocable and may not be reversed or set aside for any reason whatsoever. I/We hereby acknowledge that First Capital Bank Limited is not liable for any direct or indirect damages whatsoever and howsoever arising or errors, omissions or delays in transmission attributable ta mer us a raising from circumstances beyond First Capital Bank Limited control. I/We understand that it is an offence to use the ZETSS to undertake or facilitate maney laundering or unlawful transactions. I/We irrevocably authorise First Capital Bank Limited to reverse, block or suspend any unlawful transactions. I/We hereby indemnify First Capital Bank Limited against any cost, claims, liability or losses whatsoever arising from this transaction or unlawful use of the RTGS system. First Capital Bank Limited liability in the event of any proven claim is limited to and may not exceed interest on the transaction amount. I/We acknowledge that no RTGS instruction shall be deemed to have been accepted by the bank for any purpose until my/ our account with details provided above has been duly debited with the amount of the RTGS instruction.				
With the amount of the RTGS instruction.	Chamba, madminy of ressession of	om this transaction or unlawful use of the RTGS		
With the amount of the RTGS instruction.	Chamba, madminy of ressession of	om this transaction or unlawful use of the RTGS		
Whe acknowledge that no RI GS instruction. Authorised Signatories MAKARUKE KU	Chamba, madminy of ressession of	om this transaction or unlawful use of the RTGS		
Whe acknowledge that no RI GS instruction. Authorised Signatories	d may not exceed interest on the transaction a bank for any purpose until my/ our account wi	om this transaction or unlawful use of the RTGS		
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FULL NAMES MAKARUKE KU Contact Numbers: 0773488428 FOR BANK USE ONLY	May not exceed interest on the transaction a bank for any purpose until my/ our account with the second sec	om this transaction or unlawful use of the RTGS		
Authorised Signatories FULL NAMES MAKARUKE Contact Numbers: 0773488428 FOR BANK USE ONLY WALK IN CUSTOMERS DATE: 29 03 23 TIME 120 6	CALL BACK CONFIRMATION CONFIRMED BETWEEN	om this transaction or unlawful use of the RTGS mount. th details provided above has been duly debited		
Authorised Signatories Make FULL NAMES MAKARUKE KU Contact Numbers: 0773488428 FOR BANK USE ONLY WALK IN CUSTOMERS DATE: 29 03 23 TIME 1206 NAME OF CUSTOMERVPRESENTER LAT MAKE OF TUKE	CALL BACK CONFIRMATION CONFIRMED BETWEEN COMPANY OFFICIAL NAME	om this transaction or unlawful use of the RTGS mount. th details provided above has been duly debited		
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ZIMBABWE ELECTRONIC TRANSFER AND SETTLEMENT SYSTEM (ZETSS) PAYMENT FORM

	FIRST CALL			
Customer to fill in				
The Manager First Capital Bank Limited Complete	14025			
Complete	in Triplicate 0 4 APR 2023			
MASVINGO BRANCH	STEMP			
Dear Sir/Madam	MASYINGO			
APPLICATION FOR ELECTRONIC TRANSFER Kindly effect the fol				
Amount in figures (ZWL) \$111 289-00 Amount in words ONE HUNDRED AND ELEVEN THOUSAND TWO HUNRED AND EIGHTY NINEN DOLLARS				
APPLICANT'S DETAILS Applicant's full name MAKARUKE KUMBIRAL P.	51037 15 Number 22-183074L22			
56:				
Business Address ZOU MASVINGO				
Account Denomination_RTGS				
Debit Account Number 250910954-32	Branch MASVINGO			
BENEFICIARY'S DETAILS NAME AND ADDRESS ALLIED HEALTH PRACTI				
	THOMAS CONTRACTOR			
BENEFICIARY'S BANKERS CBZ BRANCH AVONDALE	bb161383840018			
BRANCH AVONDALE	Utility Bill Rent Other			
TRANSACTION DESCRIPTION PRACTISING RENEWAL FEE	FOR RUMBINAL MARARORE DISTA			
For Zimra Payments Please provide the following:				
Tax Obligation	Business Partner No			
Area Office Code				
I/We do hereby represent and declare to First Capital Bank Limited that the above information is true and accurate in every respect. I/We undertake to retain the supporting documents and invoices for this transaction and to provide same to First Capital Bank Limited on request. I/We further understand that payments made via the ZETSS are final and irrevocable and may not be reversed or set aside for any reason whatsoever. I/We hereby acknowledge that First Capital Bank Limited is not liable for any direct or indirect damages whatsoever and howsoever arising or errors, omissions or delays in transmission attributable to me! us or arising from circumstances beyond First Capital Bank Limited' control. I/We understand that it is an offence to use the ZETSS to undertake or facilitate money laundering or unlawful transactions. I/We introvocably authorise First Capital Bank Limited to reverse, block or suspend any unlawful transactions. I/We hereby indemnify First Capital Bank Limited against any costs, claims, liability or losses whatsoever arising from this transaction or unlawful use of the RTGS system. First Capital Bank Limited flability in the event of any proven claim is limited to and may not exceed interest on the transaction amount. I/We acknowledge that no RTGS instruction shall be deemed to have been accepted by the bank for any purpose until my/ our account with details provided above has been duly debited with the amount of the RTGS instruction.				
Authorised Signatories At rike				
FULL NAMES MAKARUKE KU	MBIRAI			
Contact Numbers: 0773 488428				
FOR BANK USE ONLY				
WALK IN CUSTOMERS	CALL BACK CONFIRMATION			
TIME	CONFIRMED BETWEEN			
NAME OF CUSTOMER/PRESENTER & MRE	COMPANY OFFICIAL NAME			
POSITIVE IDENTIFICATION NUMBER 74 L22	BANK OFFICIAL NAME			
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Date	Topic
11/01/22	Circup Assessment
20/01/2	2 Gard Courselling training
23/06/2	2 Life skills orientation training
04/03/22	BHASO Board meeting
06/07/2	2 Drug & Substance asuse presentation
181047	2 "NSENCE tallmayon Chiblabuse"
01/28/12	2 Personal Psychotherapy Guidance and Conselling workshop
oylelzz	Guidance and Conselling workshop
22/08/2	Commy y unreach X 4
25/822	

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Category	Points	
7	2	En-zinga
11	5	Ameoma
11	5	CF PRIMARY & SECONDLEY
49	4	& SPECIAL MEEDS TRUCK
26	10	1 3 JUN 2022
TI	5	P.O. BOX 83. MASVIN
10	2	ZIMBABWE
26	10	SOS
9	2	ISTRY B. SI
	2	MINISTRY OF PRITE AY & SCHOOL PSYCHO & SPECIAL NEI & SPECIAL NEI P.O. BOX 89 ZIMB
	2	PRICERY & SUCCESSION OF PRICER
	2	ABN DS OG OG OG
		E SVIII
		MINISTRY OF PRICE AV & SECONDARY OF PRICE AV & SECONDARY SERVICES SCHOOL PSYCHOLOGICAL SERVICES & SPECIAL NEEDS EDUCATION & SPECIAL NEEDS EDUCATION P.O. BOX 89, MASVINGO ZIMBABWE
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