



Dear CHOPERA PROSPER MRS

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	\$101370
Date	31-Mar-2023
Narration	Prosper Chopera AN0119 ALLIED HEALTH PRACTIONERS COUNCIL OF ZIMBABWE CBZ BANK REF 011FTMC230900053

Emailed  
For & on behalf of CBZ Bank

