



Dear CHINYANI PROSPER MR

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	\$66000
Date	27-Mar-2023
Narration	renewal fees 2023 Prosper Chinyani AT ALLIED HEALTH PRACTIONERS COUNCIL OF ZIMBABWE CBZ BANK REF 670FTMC230860501

Emailed
For & on behalf of CBZ Bank

