

CASHIER'S RECEIPT

ı 3456789

В

MR. LASAM F NAME MAN TEST RECEIPT NO.: E000141151 -A39-ML1-C

 PER ADD1 LAT E TOWER
 POLICY NO. : B270854374

 PER ADD2 TOWN
 DATE : JUN 27,2000

TAI PO TIME : 18:3

N.T. AGENT 4 : TS, IG CHI HILL

AGEN (L0 8) / A CAL EWAY BAY (88)

CASHIER MARIA ANG

PAYMENT APPLIED TO: DEPOSIT FOR POLICY CHANGES / REINSTATEMENT

HK\$ 4,873.00

Remarks: 1. Cash payment should only be made direct

- 2. Payments are subject to conditions stated on reverse side.
- 3. This is a computer-generated document. No significant required.

THANK YOU FOR YOUR PAYMENT

MR. LASAM F NAME MAN TEST RECEIPT NO.: E000141151 -A39-ML1-C POLICY NO.: B270854374 DATE: JUN 27 2022 Time: 18:32

CASH HK\$ 4,873.00

PAYMENT SUMMARY: HK\$ 4,873.00 AMOUNT EQUIVALENT: HK\$ 4,873.00

CONDITIONS OF PAYMENT

This receipt is an acknowledgment of your payment only. The payment of any premium, interest or other sum due, and the insurance policy you applied for is subject to clearance and the Company's approval. In case we do not approve, we will give you a refund.

繳費須知

此繳費收據只確認本公司收取了您的款項。您所繳付的任何保費、利息或其他到期款項,及投保的保險計劃, 必須在繳款兑現後及獲得本公司的核准,方被視為成功處理。否則,我們會將款項退還給您。

(所有中文説明均以英文為準)

