

Debit Note**Your Policy Number:** 614397**Type of Policy:** Public Liability**Name of Policyholder:** SYNDICAT DES
COPROPRIETAIRES GREEN VILLAGE ST ANTOINE**Date:** 28/08/2024**Period of Insurance:** From 26/08/2024 at 00:00 To 25/08/2025 at 23:59**Instalment Date**

28/08/2024

Amount Payable

MUR 15,552.50

Instalment Status

Due

Total Premium

(Inclusive of Policy Costs)

MUR 15,552.50

This is a computer-generated document and it does not require a signature. This shall not be invalidated solely on the ground that it does not contain any signature.

Our Business Registration No: C14126016