

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ANTHONY TUNJE MWANGUDZA ADM NO: BBA/0217/2014
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OBONYO CLIFTONE ONYANGO ADM NO: BBIT/644J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUREITHI GLADYS NJOKI ADM NO: BBIT/609J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MONDO MOHAMMED AMINA ADM NO: BBIT/604J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AUGUSTIN KYENGO KIMANTHI ADM NO: BBIT/585J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MBOGO JEMIMA WANJIRA ADM NO: BBIT/637J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KALUNGE JOSEPH KYENDWA ADM NO: BBIT/618J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUIRURI BILLY MWANGI ADM NO: BBIT/580J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OBONYO CLIFTONE ONYANGO ADM NO: BBIT/644J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OTIENO JAMES H ADM NO: BBIT/651J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: TOM ANTONY MULINGE ADM NO: BBIT/619J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OGEGA MOSOMI DICKSON ADM NO: BBIT/642J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GACAU VIRGINIA WANJA ADM NO: BBIT/612J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MASAA BONIFACE KAVULANYA ADM NO: BBIT/658J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MATATA CAROLINE NASIKE ADM NO: BBIT/645J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OMOG EUGINE L ADM NO: BCOM/312J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIRIGA ROHI MUTHOMI ADM NO: BCOM/256J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NJAGI JOHNMARTIN NJERU ADM NO: BCOM/425J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NDWIGA TRACYWENDY WARUGURU ADM NO: BCOM/472J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MATANO KWEKWE AISHA ADM NO: BCOM/452J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MALE SAAD FIRDAUS ADM NO: BCOM/462J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Hassan Firdaus Hood ADM NO: BCOM/561J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ATHMAN KHADIJA ALI ADM NO: BCOM/574J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KHALUHI IVY ADM NO: BCOM/526J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WASONGA LILIANE AKINYI ADM NO: BCOM/393J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MARY MAGHEMA MWANDEMBO ADM NO: BCOM/487J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HUSSEIN FARZANA MOHAMED ADM NO: BCOM/495J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MULATYA NZILANI MAGDALENE ADM NO: BCOM/482J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SALIM MWANAMVUA HAMISI ADM NO: BCOM/459J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OCHIENG KEVIN OTIENO ADM NO: BCOM/541J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OTIENO OLIVER JACK ADM NO: BJMC/395J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAITHAKA FELIX KABUGI ADM NO: BJMC/353J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAFULA ALFAYO JUMA ADM NO: BJMC/378J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANGAO UHURU BINTIALI ADM NO: BJMC/348J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHETI CLARIS IGAHO ADM NO: BJMC/367J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANG'OMBE PATIENCE MASHINIKO ADM NO: BJMC/347J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WANYONYI S STEPHEN ADM NO: BJMC/376J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BEATRICE MWENDE PAUL ADM NO: BJMC/362J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUIRURI SIMON MUIGAI ADM NO: BJMC/354J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANGI DOREEN WANJIKU ADM NO: BJMC/0198/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JEREMIAH MULINGE MUENDO ADM NO: BSEE/0167/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: MORIANGO LAWRENCE OMWEGA ADM NO: BSIT/135J/2016
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BWAMU HILLARY ADM NO: BSIT/320J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GEOFFREY BRUCE IKAAL ADM NO: BSIT/345J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JANE NDUNGE ADM NO: BSIT/386J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JUMA GRIVIN MUYAKA ADM NO: BSIT/340J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALLAN AUKA ONYANCHA ADM NO: BSIT/362J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIMEU PRISCILA MWONGELI ADM NO: BSIT/290J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KINUTHIA THAYU MACHARIA ADM NO: BSIT/387J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BAKARI KIMANI ABBASS ADM NO: BSIT/289J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AISHA HUSSEIN SHARIFF ADM NO: BSIT/270J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANGI BILLY GICHUGU ADM NO: BSIT/275J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYANCHAMA KELVIN MIGOSI ADM NO: BSIT/366J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWAGA RASHIDI SEFU ADM NO: BSIT/271J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANGALE TRIUMPH IMARA ADM NO: BSIT/319J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPLANGAT EDWIN TERER ADM NO: BSIT/325J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
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COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KARIUKI EDWIN NDUNG'U ADM NO: BSIT/286J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPKOECH CALEB ADM NO: BSIT/313J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WILSON IDHA MORAA ADM NO: BSIT/292J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GODRICK MUKHWANA ADM NO: BSIT/339J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BARASA NABWIRE FRANCISCA ADM NO: BSIT/337J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: EDWARD OTIENO OKETCH ADM NO: BSIT/357J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ROTICH KIPNGENO KELVIN ADM NO: BSIT/314J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Ali Mohamed Timimi ADM NO: BSIT/376J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUINDE DARIUS MUIMI ADM NO: BSIT/300J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RICHARD KIBORE ORINA ADM NO: BSIT/374J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LEVIT OTIENO MBUYA ADM NO: BSIT/350J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GEREZA MWAMBA MORRIS ADM NO: BSIT/379J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MALECHE RYNE JOANAMS ADM NO: BSIT/368J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUTINDA WOIE GREGORY ADM NO: BSIT/298J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OWUORA ELIJAH ODERO ADM NO: BSIT/351J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KATONGOI ANGELA NZAMBI ADM NO: BSIT/294J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUINDE DARIUS MUIMI ADM NO: BSIT/300J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NZOMO ROSE MBITHE ADM NO: BSIT/296J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MATILDA JOAN ADHIAMBO MBOYA ADM NO: BSIT/361J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYAMBU M. JAVAN ADM NO: BSIT/303J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WANJOHI FELIX MURIITHI ADM NO: BSIT/280J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KASSIM YAHYA ALI ADM NO: BSIT/0103/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYAKITE PETER OUMA ADM NO: BSMD/124J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPROP KELVIN ADM NO: BSMD/211J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GENGA ODHIAMBO BENARD ADM NO: BSME/135J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NZOVU LUTZIA KURURA ADM NO: BSME/142J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: MUNYAO KYOSI DANIEL ADM NO: BSME/162J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALLAN ABALA ADM NO: BSME/176J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GITAU KELVIN NDERU ADM NO: BSME/153J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOGUSU ONCHOMBA ANTHONY ADM NO: BSME/270J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OTIENO VICTOR ADM NO: BSME/267J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MARK MUTUMA ADM NO: BSME/232J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BIEGON CALEB KIBET ADM NO: BSME/258J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RUTH AUMA OMEGO ADM NO: BSME/266J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SEBASTIAN GEORGE MULWA ADM NO: BSME/151J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHEROCK K COLLINS ADM NO: BSSC/018J/2015
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALOO MELANIE ONYANGO ADM NO: BSTM/692J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LEMOOLI ESAU CLAOS ADM NO: BSTM/671J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OTIENO ALLAN ADM NO: BSTM/693J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BUNYASI KEVIN PETER ADM NO: BSTM/669J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Mwenda Abraham ADM NO: BSTM/701J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MBUGUA FRANCIS WAINAINA ADM NO: BSTM/649J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NJAGI PATRICK WAMAI ADM NO: BSTM/645J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OGAMBA DAVID ADM NO: BSTM/698J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SAMUEL JANESSE MUTHUI ADM NO: BSTM/653J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WENDY PRISCA APIYO ADM NO: BSTM/666J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUTHONI MARY WANGARI ADM NO: BSTM/648J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OTIENO GEOFREY ADM NO: BSTM/684J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BRENDA AKHISNWA ADM NO: BSTM/668J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SCOVINE AWUOR AMOLO ADM NO: BSTM/706J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DENNIS NKUITO LIARAM ADM NO: BSTM/670J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OOKO DEBBIE ADHIAMBO ADM NO: BSTM/689J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OBONYO BERRYL TITUS ADM NO: BTAC/202J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPKEMOI JOSEPHAT ADM NO: BTAC/251J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ONYANGO VICTOR ADM NO: BTAP/166J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Kang'ethe Ian Njuguna ADM NO: BTAP/263J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DAVID OTIENO ODHIAMBO ADM NO: BTEE/232J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: MUTHONI JOAN ADM NO: BTHM/193J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: PAULINE AMONDE MBEO ADM NO: BTHM/219J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GIKERA TIMON GITONGA ADM NO: BTHM/222J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANGI WILLIAM WANJAH ADM NO: BTHM/224J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MBOLOTI FRIDAH ADM NO: BTHM/180J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: PAULINE AMONDE MBEO ADM NO: BTHM/219J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DORCUS AGUTU OMOLLO ADM NO: BTHM/0083/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: PHILIP MUTHAMA JOHN ADM NO: BTHM/0064/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JOYCE MUENI MBALUKU ADM NO: BTHM/0081/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Kiplangat Emmanuel ADM NO: BTIT/472J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ONDORO ISAIAH NYAUMA ADM NO: BTIT/462J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIBET GIDEON ADM NO: BTIT/076J/2016
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIMUTTAI ENOCK KIPYEGON ADM NO: BTIT/414J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NKONGE DANIEL MWANGANGI ADM NO: BTIT/396J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MILLICENT MANASI OSEBE ADM NO: BTIT/438J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NJATHI SAMUEL MUTURI ADM NO: BTIT/373J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AILA SAID CHUNFE ADM NO: BTIT/410J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WILLIAM CHARLES NYANJE ADM NO: BTIT/305J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KISAVI SHADRACK KINYANGU ADM NO: BTIT/387J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MILLICENT MANASI OSEBE ADM NO: BTIT/438J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPTANUI BARNABA ADM NO: BTIT/415J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAMAU TIMOTHY MWANGI ADM NO: BTIT/367J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODHIAMBO VICTOR EMMANUEL ADM NO: BTIT/460J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Maingi Brian Kibet ADM NO: BTIT/470J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OWINO KENNEDY OCHIENG ADM NO: BTIT/454J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYAMARI HARRIET MOGITI ADM NO: BTIT/398J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OGALLO MARK AMOS ADM NO: BTIT/451J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MAITHYA CATHERINE MBEKE ADM NO: BTIT/394J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NOEL SIFA SAFARI ADM NO: BTIT/361J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OMINDE COLLINS ADM NO: BTIT/436J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WANJIGU DIVINA ADM NO: BTMB/203J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AYUMA TRACEY ADM NO: BTMB/211J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: ODHIAMBO TEDDY JIM ADM NO: BTME/128J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ARUM SAPHAN OCHIENG ADM NO: BTME/174J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WILFRED WERE OKWACHI ADM NO: BTME/188J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GITAU JONAH MWACHIA ADM NO: BTME/181J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OWITI LEVINS ODHIAMBO ADM NO: BTME/199J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LUCY TREZA AKINYI ADM NO: BTME/195J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ROTICH KIPRONO GIDEON ADM NO: BTME/168J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NJENGA KENNEDY KAMOCHE ADM NO: BTME/159J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LUCY TREZA AKINYI ADM NO: BTME/195J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAIMENYI ALEX ADM NO: BTME/179J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OGOLA LUCAS OMONDI ADM NO: BTME/200J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Kimathi Denis ADM NO: BTME/205J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUGA ANNE MERYL ADM NO: BTME/203J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KHAYONGO SHADRACK ADM NO: BTME/185J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HEKIMA KOI SAMSON ADM NO: BTME/171J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: STEPHEN MWANGI WANJOHI ADM NO: DCS/228J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OMAE ONDIEKI JOASH ADM NO: DCS/191J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FRANCIS MWANGI WANJIRU ADM NO: DCS/205J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SAMERIA LELENGUYA SAMWEL ADM NO: DCS/231J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: JUSTIN NTOITHA MUTHURI ADM NO: DCS/153J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RAPHAEL MANYUVA MULANDI ADM NO: DCS/208J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BRIAN KYALO MUSILA ADM NO: DCS/224J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: STEPHEN MWANGI WANJOHI ADM NO: DCS/228J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FRANCIS MWANGI WANJIRU ADM NO: DCS/205J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DEBORAH ELIAS KWAMBOKA ADM NO: DES/256J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUTUKU MASILA JAMES ADM NO: DES/250J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AMOJONG SERENAH ANNA ADM NO: DFOO/329J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: TUMAINI SUJI TIMOTHY ADM NO: DGD/427J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ANGELA KAVISA KIMANTHI ADM NO: DMAC/0661/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JUMA OMAR RUWA ADM NO: DPMM/1163/2022
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ANNE NJERI WANJIKU ADM NO: DPR/386J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NKUYAYU SAMMY LEKISHON ADM NO: DPR/410J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NKATHA VERITA RHEMA ADM NO: DPR/395J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ANNE NJERI WANJIKU ADM NO: DPR/386J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WANGATIA VALENTINE OWADE ADM NO: DSH/284J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: PAUL ODHIAMBO SONGORA ADM NO: BACS/104J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPLANGAT FELIX ADM NO: BACS/055J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GICHOVI DENNIS MUNENE ADM NO: BACS/026J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAMOH SUNDAY 'K'OKWACH ADM NO: BACS/100J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: UMMUKULTHUM MOHAMMED AHMED ADM NO: BACS/007J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NGETHA THURA CYNTHIA ADM NO: BACS/006J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MARU ALAAYSA JEPTOO ADM NO: BACS/054J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWITA DAVID THOMAS ADM NO: BACS/096J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FREDRICK OCHIENG ADM NO: BACS/079J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MANYA NYAORO MORGAN ADM NO: BACS/061J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JERRIE PHYLEE MAYIENGA ADM NO: BACS/086J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIMANI CYNTHIA WANJIRU ADM NO: BACS/017J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DUNCAN KIMUTAI ADM NO: BACS/051J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAMOH SUNDAY 'K'OKWACH ADM NO: BACS/100J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPKIRUI SHADRACK KOECH ADM NO: BACS/046J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GIVAN JUMA MOSES ADM NO: BACS/060J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAHINYA KENNEDY MUNGAI ADM NO: BACS/011J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ONYANGO NICHOLAS OMOLLO ADM NO: BACS/083J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OUMA JOHN OTIENO ADM NO: BBOM/358J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUVUVA ANGELICA MWONGELI ADM NO: BBOM/365J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SWALEH BAKARI ADM NO: BBOM/292J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SAKONG C PRAISE ADM NO: BBOM/321J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAUNDA KITALA BENSON ADM NO: BBOM/269J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DORCAS JERUSHA SAMBA ADM NO: BADS/0013/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NIJARIBO MBWANA MATTUSY ADM NO: BADS/0005/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MAUREEN MWIKALI KIMEU ADM NO: BADS/0032/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NGATI BECKMANN MUMO ADM NO: BTMA/140J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: OTIENO OTIENO MORGAN ADM NO: BTMA/152J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OTWORI NEWTON ADM NO: BTMA/103J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ERIC NGUGI MUIGAI ADM NO: BTMA/133J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BRILIAN MUSILIVI SHIVANDA ADM NO: BTMD/177J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GICHIMU MBUGUA BONIFACE ADM NO: BTMD/147J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MIRITI GRACE NTINYARI ADM NO: BTMD/155J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JEBET MARTHA ADM NO: BTMD/170J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOENGA JULIUS MATAGARO ADM NO: BTMD/171J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KITHINJI KIRIMI BONIFACE ADM NO: BTMD/164J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: VALARY MUCHITI ADM NO: BTMD/179J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Ronoh Leakey Kipkoech ADM NO: BTMD/194J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WANAMBISI VICTOR BRANNEN ADM NO: BSDS/249J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALI AISHA AHMED ADM NO: BADS/001J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Asha Mwinyi Mohamed ADM NO: BADS/028J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WANJALA SAMUEL SIMIYU ADM NO: BIS/079J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ACHOLA TENNYSON MURPHY ADM NO: BIS/136J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIBET GIDEON KORIR ADM NO: BIS/092J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIRIMI MURIUKI LACTON ADM NO: BIS/073J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: MILIKI SAIDI MBONDE ADM NO: BIS/139J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ONYANGO DAVID ADM NO: BBJ/206J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NGUMBAO SARAH SIDI ADM NO: BBJ/175J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ABNER OBUBA OGANDO ADM NO: BBJ/204J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DIANE CHERONO ADM NO: BBJ/189J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AGANI TRACY ADM NO: BBA/544J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ONYANGO BERYL J. ADM NO: BBA/572J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Pretty Rose-Marie Owano ADM NO: BBA/580J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AMINA SWALEHE ABDALLA ADM NO: BBA/0633/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RUKIA RAMADHAN RAJAB ADM NO: BBA/0632/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MERCY CHERONO ADM NO: BBA/0661/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIRIRI JAMES KINYANJUI ADM NO: BBIT/606J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AMWAYI NEVILLE ADM NO: BBIT/628J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NICKSON KIMELI ADM NO: BBIT/630J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWOLOLO CHRISTOPHER MUTINDA ADM NO: BBIT/625J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Mjumbe Ambra Munyuli ADM NO: BBIT/659J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUTUARUHIU CLEMENT GIKUNYU ADM NO: BBIT/627J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: THURANIRA STEPHEN ADM NO: BBIT/622J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIEMA RODNEY MUTINDA ADM NO: BBIT/620J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Abdulaziz Ramadhan Ali ADM NO: BCOM/564J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DANCAN NYACHIO ADM NO: BCOM/545J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OTIENO GEORGE ADM NO: BCOM/368J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: MUENI SAMSON MWENDWA ADM NO: BCOM/578J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Patel Zulfah Chandrakant ADM NO: BCOM/562J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JEPNGETICH GLORIA ADM NO: BCOM/511J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JEBET FAITH ADM NO: BCOM/369J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SUMAYAH ASMAAH AGESA ADM NO: BCOM/454J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: YALWALA BRADLEY ADM NO: BCOM/516J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: VUGUTSA SHAMMY ADM NO: BCOM/519J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUKUHI MONICAH ADM NO: BCOM/504J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OGOLLA LAUREEN OWINO ADM NO: BCOM/572J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ESINYA MASINDE JERRY ADM NO: BCOM/513J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OMARI ANDREW OBIERO ADM NO: BCOM/538J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DENMARK JUMA ADM NO: BCOM/549J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OYARE WILLIAM ODHIAMBO ADM NO: BCOM/533J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: TOLE DOREEN GAKII ADM NO: BCOM/512J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUNYWOKI CHRISTOPHER NGUMBI ADM NO: BCOM/475J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIAMUKO VICTOR ADM NO: BCOM/489J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIMUTAI JEROTICH NETTY ADM NO: BCOM/500J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KASSIM NEKESA MARIAM ADM NO: BCOM/522J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAISHA BARASFORD ADM NO: BCOM/530J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WINFRED KELI JUMA ADM NO: BCOM/468J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAGIRI BANCY ADM NO: BCOM/469J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SWALEH ISLAM SWALAH ADM NO: BCOM/464J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: KYALO DANNY MUTUA ADM NO: BCOM/488J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ATIENO SHELLA ABONG'O ADM NO: BCOM/551J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AWINO MAURINE ABILA ADM NO: BCOM/544J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: TIMONA KINYUA MUGO ADM NO: BCOM/0945/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: STEPHEN ONYANGO NYAKIRA ADM NO: BCOM/0980/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HUMPHREY ANUNO KIPRONO ADM NO: BCOM/0960/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ANYONJE CHARITY MUKABANE ADM NO: BJMC/379J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MULE LILIAN MUMBUA ADM NO: BJMC/383J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OYARO CAROLINE BOYANI ADM NO: BJMC/385J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODHIAMBO EUNITA AKINYI ADM NO: BJMC/391J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: POMPHY OTIENO MIGOT ADM NO: BJMC/0178/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OCHIENG HILLARY ODENY ADM NO: BMCS/107J/2016
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: EDIGAH MASAI ADM NO: BMCS/184J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODA BERYL OKINGO ADM NO: BSCE/042J/2015
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GRIFFINS GICHURE MWANGI ADM NO: BSCE/050J/2016
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: VEROLINE ATIENO OWINO ADM NO: BSEE/119J/2016
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LAZSON ADAMS ADM NO: BSEE/224J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAFULA ESTHER NASIMIYU ADM NO: BSEE/239J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPNGETICH BENARD ADM NO: BSEE/272J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MATTJEW DENNIS MUTUA ADM NO: BSEE/270J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LUQMAN ANWAR SAID ADM NO: BSEE/0155/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUTUKU MWAKA ACHIM ADM NO: BSEE/334J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ADINDA ATIENO FAITH ADM NO: BSEE/338J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAKARO STEPHEN KARIUKI ADM NO: BSFQ/334J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MAINA LYDIAH WAITHIRA ADM NO: BSFQ/274J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIMUTAI ALLAN ADM NO: BSFQ/337J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BETH MUUNDA MUTISYA ADM NO: BSFQ/0094/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: TERENCE MALOMBE JONATHAN ADM NO: BSIT/301J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MERCY JEPTEPKENY ADM NO: BSIT/322J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUIRURI THOMAS THENGE ADM NO: BSIT/283J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MBAIZA OKINDO ALLAN ADM NO: BSIT/335J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LUNG'ATSO EDWIN BUNYIWA ADM NO: BSIT/390J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ONYANGO JULIUS ODHIAMBO ADM NO: BSIT/381J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WATIRI SUEEDNA WANGARI ADM NO: BSIT/282J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KISIA DAVIES WESLEY ADM NO: BSIT/342J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: PETER ALICE MUENI ADM NO: BSIT/329J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ROTICH JEPKEMBOI JANE ADM NO: BSMD/170J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYOIKE AUSTIN NGUGI ADM NO: BSMD/159J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LOCHALINGA L PHELEMON ADM NO: BSMD/139J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ROTICH KIBET ALFRED ADM NO: BSMD/181J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JULIET MONYENYE ONDUSO ADM NO: BSMD/167J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OMENYA LUCY AKINYI ADM NO: BSMD/151J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYAGA JAMES MUGAMBI ADM NO: BSMD/168J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODHIAMBO STEPHIE S ADM NO: BSMD/162J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPNGETICH NOAH KALYA ADM NO: BSMD/145J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYAGA JEFF I ADM NO: BSMD/173J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JESANG HILDA ADM NO: BSMD/148J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHEPKEMOI LINDA LANG'AT ADM NO: BSMD/208J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OPOLE JOB SAMMY ADM NO: BSMD/149J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SANG KIPRONO ALEX ADM NO: BSMD/238J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUNAJI GLORIA ADM NO: BSMD/196J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

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The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NASIMIYU GLORIA KHAMALA ADM NO: BSMD/195J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KATHENGE MWANZIA ADM NO: BSMD/188J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AMOS KIPILA KAARE ADM NO: BSMD/224J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: KIMANTHI EDWARD NDUNG'U ADM NO: BSME/202J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KYALO E MUTISYA ADM NO: BSME/159J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIBET EMMANUEL ADM NO: BSME/179J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHEPKEMOI BRENDA ADM NO: BSME/197J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OGEMBO VICTOR ONYANGO ADM NO: BSME/141J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODIWUOR BOB MASESE ADM NO: BSME/137J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DENIS MWIRIGI SIMIYU ADM NO: BSME/161J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JEREMY MUTUGI NKONGE ADM NO: BSME/194J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: TOO BRIAN KIPKURUI ADM NO: BSME/171J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SIMIYU ALLAN BARASA ADM NO: BSME/143J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SHIKUKU CEDRICK TEMESI ADM NO: BSME/158J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: NYARWABA OCHEGO CALVIN ADM NO: BSME/189J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MULUNGO BRIAN OTIENO ADM NO: BSME/184J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LANGAT KIPNGENO KELVIN ADM NO: BSME/117J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: VANESSA MUBOKA WEKHOMBA ADM NO: BSME/163J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OCHIENG EVANS OTIENO ADM NO: BSME/250J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUCUGA MONICAH NYAMBURA ADM NO: BSME/215J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OLANG'O MICHAEL GRUBBS ADM NO: BSME/269J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: MUNINGU JONES ADM NO: BSME/236J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAMITI PAUL KAGO ADM NO: BSME/230J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHERUIYOT BRIAN ADM NO: BSME/251J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWAKWIDA PATIENCE E. ADM NO: BSME/249J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOHAMED RAYMAT OMAR ADM NO: BSME/209J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KASUKU HEROM MIRERI ADM NO: BSME/219J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUKETI SHISIA MARION ADM NO: BSSC/382J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYAMWEYA MOMANYI DANCAN ADM NO: BSSC/422J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: IAN PARSEEN SILOMA ADM NO: BSTM/663J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: IRERI WINFRED WANJIKU ADM NO: BSTM/576J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAITHAKA JOYCE GATHONI ADM NO: BSTM/644J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OWANO OKOTH MOSES ADM NO: BSTM/694J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: PEPELA DAGLASS ADM NO: BTAC/200J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: PEPELA DAGLASS ADM NO: BTAC/200J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOSES JEMBE LEWA ADM NO: BTAC/170J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: PETER MUTIE ADM NO: BTAC/223J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: GODWINS ODHIAMBO NGOYA ADM NO: BTAC/195J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHEBOI JEPKORIR NATALIE ADM NO: BTAC/247J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SAYIATON LEKISHON MOSES ADM NO: BTAC/159J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MCKNIGHT KIBET ADM NO: BTAC/233J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KWINA JOSEPH KILEMBWA ADM NO: BTAC/181J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NZYUKO SAMMY NDUNGA ADM NO: BTAP/117J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYONGESA M VIDELIS ADM NO: BTAP/138J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MBUGUA KABUTU KELVIN ADM NO: BTAP/111J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LAVENDER AWUOR OTIENO ADM NO: BTAP/260J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LAURA OWANO TSUMAH ADM NO: BTAP/239J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPROP STEVE KEMBOI ADM NO: BTAP/228J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MURUMBUTSA DENIS ADM NO: BTAP/240J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SANDRA CHEPKIRUI ADM NO: BTAP/233J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MARGRET KWAMBOKA NYAMWARO ADM NO: BTAP/249J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIMANTHI VANESSA KAVATA ADM NO: BTAP/225J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NOAH OMONDI ADM NO: BTAP/244J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WASIKE TREVOR ADM NO: BTAP/238J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPROP STEVE KEMBOI ADM NO: BTAP/228J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OYIEKO FRANCIS OTIENO ADM NO: BTCE/309J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MIDIGO HANINGTON OCHOLA ADM NO: BTEE/317J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FRANCIS KAGURU MWANGI ADM NO: BTEE/0188/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KARURI SUMAIYA AISHA ADM NO: BTEE/183J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KARURI SUMAIYA AISHA ADM NO: BTEE/183J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Valaria Mutondo witava ADM NO: BTEE/246J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RUTO KELVIN KIPROP ADM NO: BTEE/219J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Cheruyot Humphrey ADM NO: BTEE/252J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ZAKAYO BETHWEL APALA ADM NO: BTEE/150J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPKORIR DOMINIC ADM NO: BTEE/217J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LEE KIPYEGO ADM NO: BTEE/215J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Irungu Henri Kamande ADM NO: BTEE/245J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FRANKLINE ODHIAMBO OBUNGA ADM NO: BTEE/233J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPLANGAT FELIX ADM NO: BTEE/262J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FRANKLINE ODHIAMBO OBUNGA ADM NO: BTEE/233J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ABIUD KIPLIMO ADM NO: BTEE/216J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NGARUIYA KIGWA KELVIN ADM NO: BTEE/182J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AVULA KILAMONDA JARRET ADM NO: BTEE/224J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KITOTHYA BENRODGERS MUNYWOKI ADM NO: BTEE/193J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Kisilu Joshua Musembi ADM NO: BTEE/247J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WELTERS OPENDI ADM NO: BTEE/222J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NICHOLOUS KIMANZI JOHN ADM NO: BTEE/259J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANGI JOEL KARIUKI ADM NO: BTEE/200J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ONYANGO ROLLINS OTIENO ADM NO: BTEE/210J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANIKI ALBERT MUKUNDI ADM NO: BTEE/194J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ENOCK KIPROTICH MUTAI ADM NO: BTEE/205J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MBOLOTI FRIDAH ADM NO: BTHM/180J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AMINA WAMBUI MZEE ADM NO: BTIT/0123/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: PETER WAEMBU WACHIRA ADM NO: BTIT/0120/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: ERICK KANG'ETHE MWANGI ADM NO: BTIT/0117/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ATODE AWUOR DIANA ADM NO: BTIT/0109/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JOSEPH MAISHA OROKO ADM NO: BTIT/0124/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALFAYO SUNDULI BENJAMIN ADM NO: BTIT/435J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUTUA KENNEDY MUMO ADM NO: BTIT/382J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MALOBA OKUMU AUSTINE ADM NO: BTIT/432J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANGI GRACE NJERI ADM NO: BTIT/369J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAUNDA CAITLIN AKINYI ADM NO: BTIT/440J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OUKO VINCENT ODIWUOR ADM NO: BTIT/441J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NJUGUNA GRACE NJERI ADM NO: BTIT/479J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OLUOCH PAMELA ADM NO: BTIT/374J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OMBAYE K. SANDRA ADM NO: BTIT/442J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANGI PAUL GITONGA ADM NO: BTIT/417J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: PUGA BROWN TUNJE ADM NO: BTIT/425J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NG'ETICH GLADYS ADM NO: BTMB/202J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BRIAN MUDEGU ADM NO: BTMB/205J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GATHIOMI CORNELIUS KAMAU ADM NO: BTMB/198J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OGELLO ONYANGO FELIX ADM NO: BTMB/207J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ZAREEN SARFRAZ KHAN ADM NO: BTMB/0023/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ANDERSON JEFA KATANA ADM NO: BTME/0160/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODHIAMBO TEDDY JIM ADM NO: BTME/128J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPLANGAT EVANS ADM NO: BTME/176J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AKIM M OOKO ADM NO: BTRE/122J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPYEGON NGENO WELDON ADM NO: BTRE/278J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOHAMED LEAKY MBAGATHI ADM NO: BTRE/165J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BRIAN JAMES AGOLA ADM NO: CICM/0226/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MARY MALOMBO MRAMBA ADM NO: DBA/0381/2022
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OSANO RICHARD ADM NO: DBCE/034J/2016
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KERUBO ONYONI SHARON ADM NO: DCDC/289J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: TALIA CHELUGET ADM NO: DCDC/355J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AUMA MARY ADM NO: DCGE/505J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: UZNA TENGEYA MOKORA ADM NO: DCGE/237J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALVENE KIPCHIRCHIR ADM NO: DCS/216J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WILLIAMS AMOR TRACY ADM NO: DCS/167J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: EMMANUEL KIBIWOTT ADM NO: DCS/163J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KUGWA MWANGI LUCKY ADM NO: DCS/171J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OUMA BENARD ADM NO: DCS/192J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODHIAMBO OWUOR JORDAN ADM NO: DCS/165J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUKAI NZAMBI FELISTUS ADM NO: DCS/150J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALVENE KIPCHIRCHIR ADM NO: DCS/216J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MURITHI KIRERA PAUL ADM NO: DCS/155J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODUOR OGUTU DILLAN ADM NO: DCS/193J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NGATIA CHARLES GITAH ADM NO: DCS/130J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KELVIN KIMATHI MBAABU ADM NO: DCS/0041/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SOLOMON REREU LEMEIN ADM NO: DCS/0044/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RAHAMA HUSSEIN ADAN ADM NO: DES/252J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ABEL CHEMELTOR PKEMEI ADM NO: DES/255J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHEPKOECH KOECH FAITH ADM NO: DES/259J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWENDIA MITHIA HOSEA ADM NO: DES/243J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SOFIA MOHAMED MIRE ADM NO: DES/0033/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODUOL CECIL TUSA ADM NO: DGD/400J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHEPCHIRCHIR KIBET DAISY ADM NO: DGD/392J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: REBECCA NYAMOITA A. ADM NO: DGD/439J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: TONY KIPYATOR KEMBOI ADM NO: DGD/0141/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOHAMED MBARAK AMANI ADM NO: DICT/560J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KEDDY MACKEY ADM NO: DICT/578J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MACHARIA WAMBUI MICHAEL ADM NO: DICT/485J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WEKESA KERE EMMANUEL ADM NO: DICT/589J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OMONDI ODHIAMBO DANIEL ADM NO: DICT/549J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPNGETICH KANDIE LABAN ADM NO: DICT/525J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GREGORICH ODERA TAD ADM NO: DICT/546J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OCHIENG JOHN BORNVENTURE ADM NO: DICT/551J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALVINCE ODIWUOR DANIEL ADM NO: DICT/563J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NAJMA ABDALLA SAID ADM NO: DICT/454J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HUSSEIN ABDULLATTIF OMAR ADM NO: DICT/588J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALI ABEID YAHYA ADM NO: DICT/478J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FAITH NDUKU MWENDWA ADM NO: DICT/565J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LIBWEGE WINSLET MWANIRI ADM NO: DICT/540J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUYUNJI SASI STECY ADM NO: DICT/535J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWOSHI FEDINAND ADM NO: DICT/583J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AWUOR OTIENO VALARY ADM NO: DICT/480J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MEIRIAPE MASAIN KEVIN ADM NO: DICT/524J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HEMSTONE ONYANCHA KERORO ADM NO: DICT/575J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MALIACHI MUNASIA IGNATIUS ADM NO: DICT/538J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RHUBI WAMBUA DENNIS ADM NO: DICT/492J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OYANDO OMONDI PERES ADM NO: DICT/580J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FAITH NAZI NYALE ADM NO: DICT/0633/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MBOYA KENNEDY OTIENO ADM NO: DICT/0619/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: TWARIQ FAHIM BRIK ADM NO: DICT/0686/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JOY MWANGANGI ADM NO: DICT/0671/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GODWIN MERITEI SARINKE ADM NO: DICT/0631/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GRACE WANJERI MUGO ADM NO: DICT/0684/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WITSCHGE WANG'ORE MAKANDAGO ADM NO: DICT/0637/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MONICA KWEKWE MARADI ADM NO: DICT/0663/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JOYCE NYAKWEA WACHIRA ADM NO: DICT/0644/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ASHA SILANGO ADM NO: DICT/0692/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JOSEPHINE KALULUI KOMU ADM NO: DICT/0659/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DAVID MUSEI KAVITA ADM NO: DICT/0666/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JOSEPH MUSUNGU ISHARA ADM NO: DICT/0627/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWARUWA KATANA MUDIGO ADM NO: DICT/0646/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: VALERIANA EDITA MAGHANGA ADM NO: DICT/0662/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOREEN CHITSITSA MZUNGU ADM NO: DICT/0624/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOHAMED HASSAN MOHAMED ADM NO: DICT/0674/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: TELVIN ISRAEL AMISI ADM NO: DICT/0667/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: IBRAHIM ABDI IBRAHIM ADM NO: DICT/0687/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: ABUBAKAR KAMAU HASSAN ADM NO: DICT/0628/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ASHLEY WANGUI WANJOHI ADM NO: DICT/0638/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JOSIAH KIIO MULANDI ADM NO: DICT/0621/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: EMMANUEL ASAVA OKIRU ADM NO: DICT/0685/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOSES MUHINDI ADM NO: DICT/0675/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: TINAYO KETURAI ADM NO: DICT/0654/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SOLOMON BABERE MWITA ADM NO: DICT/0651/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: IMMACULATE WENDY OMONDI ADM NO: DICT/451J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIOKO J MUSAU ADM NO: DIMB/130J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAMAU PAUL GACHANA ADM NO: DIMB/160J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RIZIKI JOYCE ADM NO: DLTM/416J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CRYTON OJONDO ADM NO: DLTM/245J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUTISO DANIEL ADM NO: DLTM/287J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LEON SANDE MWAVITA ADM NO: DLTM/0371/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OKEYO EYANTONE OCHIENG ADM NO: Dltm/380j/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MULI NDICHU MARTIN ADM NO: DMAC/494J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KALOKI MULANDI JOHN ADM NO: DMAC/470J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WEST ORINDA TARIBO ADM NO: DMAC/479J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DAISY AWUOR VERA ADM NO: DMAC/527J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JULIE MUGENDI KENDI ADM NO: DMAC/486J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RITA GAICHUGI ADM NO: DMAC/484J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AWUOR ODUOR MOSES ADM NO: DMAC/266J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OWOUR AKINYI JACINTA ADM NO: DMAC/386J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYILE CYRUS MULINGE ADM NO: DMAC/356J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MIREGWA MAXWELL ADM NO: DMAC/395J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MELODY BONARERI ADM NO: DMAC/0709/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NICHOLUS OMONDI OCHIENG ADM NO: DMAC/0642/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FAUSTO LUSEKAH IKOLOMANI ADM NO: DMAC/0693/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AISHA JUMAA ADM NO: DMAC/0482/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: REHEMA KAZUNGU MASHA ADM NO: DMAC/0644/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RABECCA MUKAMBE LEWA ADM NO: DMAC/0656/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ERIC MBWIKI MUTHIANI ADM NO: DMAC/0681/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WENDY ATIENO ODUOR ADM NO: DMAC/0682/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FAITH KAVINDU MUTETI ADM NO: DMAC/0697/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KHADIJA MWASYA KIOKO ADM NO: DMAC/0680/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BONIFACE MUTHWII MUSYOKI ADM NO: DMAC/0660/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: WAFULA STANLEY WANJALA ADM NO: DMAC/0667/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: VICTORIA WANJALA WAMBUA ADM NO: DMAC/0695/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DENNIS OPIYO ODUORI ADM NO: DMAC/0651/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NICHOLAS OMONDI ACHIENG ADM NO: DMAC/0663/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: IAN MWASEMU JEW ADM NO: DMAC/0690/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NICHOLAS MUTHOMI KINOTI ADM NO: DMAC/0676/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FAITH KAVINDU MUTETI ADM NO: DMAC/0697/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SOPHIA HASHIM NDONYE ADM NO: DMAC/0675/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HEZEL MWAKA KARISA ADM NO: DMAC/0699/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ABDIRAHMAN ABDULLAHI OSMAN ADM NO: DMAC/0685/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KWEMOI EDWIN KWALIA ADM NO: DMAC/0669/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DENNIS OPIYO ODUORI ADM NO: DMAC/0651/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SHAMIM MUSA BAKER ADM NO: DMAC/0641/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HAWAA RAMADHAN JUMA ADM NO: DMAC/0658/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FATMA SHAHAME AHMED ADM NO: DMAC/0704/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SOPHIA HASHIM NDONYE ADM NO: DMAC/0675/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NDARU MORRIS KARANI ADM NO: DMAC/347J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALLAN KIPRUTO ADM NO: DMAC/430J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ESTHER UMAZI CHIRO ADM NO: DMAC/0565/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SUDI KULONDA SULEIMAN ADM NO: DMAE/266J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OMAR BILAL KHAMIS ADM NO: DMAE/257J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JOB OKWIRI ODHIAMBO ADM NO: DMAE/0026/2016
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWAJOMBO GEORGE MWAWASI ADM NO: DMAE/061J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DENNIS MWAREMA GAZOHERE ADM NO: DMAE/0078/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FAITH MUENI KIIO ADM NO: DPMM/1140/2022
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BARBRA MUHONJA ADM NO: DPR/421J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SHARON MAINA WANJIRU ADM NO: DPR/406J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHARLOTTE KWAMBOKA BITANGE ADM NO: DPR/0049/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUTINDA ESTHER MUMBUA ADM NO: DPR/320J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAMBONA SHIRUTSI VINCENT ADM NO: DPT/151J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALKANAH MULONZYA KYEMBENI ADM NO: DTEE/0633/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JOSEPH MUIMI MUTHENGI ADM NO: DTEE/0816/2022
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ORINDA ACHIENG ADM NO: DTEE/064J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ROPHUS MNYIKA MWAMODO ADM NO: DTEE/0818/2022
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: IKUTWA GLEN ADM NO: DTEE/624J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: ROSELYN WAMAHIGA WANGARI ADM NO: DTEE/597J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HABERT MOFAT DINDI ADM NO: DTEE/0506/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MBWANA OMAR MBWANA ADM NO: DTEE/0660/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MABONGA MAVIN WANJALA ADM NO: DTEE/298J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OWINO EDWARD ODUOR ADM NO: DTEE/254J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FRANCIS MUTHAMI ADM NO: DTEE/0436/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JAPHETH KIPROTICH CHERUIYOT ADM NO: DTEE/502J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAVOLO ISAAC ADM NO: DTEE/489J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: STANCY ATIENO ADM NO: BACS/077J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NGINA WAMBUA JOSHUA ADM NO: BACS/009J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHERUIYOT MARK ADM NO: BACS/056J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OBUDHO TOM ONYANGO ADM NO: BACS/105J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OYOO OWUOR COLLINS ADM NO: BACS/087J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MAINA SOLOMON MUNYAGIA ADM NO: BACS/013J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NZAU JACKSON MUTHUKA ADM NO: BACS/021J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RODGERS OMONDI ADM NO: BACS/080J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KEMUNTO MARY MARUKO ADM NO: BACS/095J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUTISYA VICTOR MUTINDA ADM NO: BACS/014J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OBEID AMINA JUMA ADM NO: BACS/073J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OTIENO WYCLIFE OKOMO ADM NO: BACS/078J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FREDRICK OCHIENG OUKO ADM NO: BACS/005J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAGO JOHN NJUGUNA ADM NO: BACS/112J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MAINA SOLOMON MUNYAGIA ADM NO: BACS/013J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OLOO ELVIS OTIENO ADM NO: BACS/089J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GEORGE OWINO ADM NO: BACS/097J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MALABA ANDREW WAWIRE ADM NO: BACS/062J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AFWANDE SAMWEL ONYANGO ADM NO: BACS/088J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: EMMANUEL WAWIRE ADM NO: BACS/070J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MARY KAVINYA CARTIER ADM NO: BACS/025J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OYWERI NYAMORA GAVIN ADM NO: BACS/093J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: STANCY ATIENO ADM NO: BACS/077J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MARK OTIENO ONYANGO ADM NO: BACS/076J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SIUNDU CHEPKWEMOI JOY ADM NO: BIS/0034/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FAITH CHELANGAT ADM NO: BIS/0032/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FAITH JEPKURUI ADM NO: BIS/0038/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KORIR BRIAN CHERUIYOT ADM NO: BTMD/269J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOREEN KATHURE ADM NO: BAS/008J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: DOROTHY JEBICHII KIPNGETICH ADM NO: BAS/010J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OUMA GEORGE ADM NO: BBOM/352J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OUMA EMMANUEL OMOLO ADM NO: BBOM/138J/2016
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUSUNDI A VIVIAN ADM NO: BBOM/335J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODUOR COLLINS OTIENO ADM NO: BBOM/351J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUNYWOKI M ADM NO: BBOM/305J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPPS BRIAN KIBET ADM NO: BBOM/332J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OKWANY LUCY AWINO ADM NO: BBOM/342J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ONDERI NANCY NYANCHAMA ADM NO: BBOM/319J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ADIKINYI CHARITY RITA ADM NO: BBOM/334J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYAGA JANE THAARA ADM NO: BBOM/328J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUSUNDI A VIVIAN ADM NO: BBOM/335J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LAMECK OTIENO OTIENO ADM NO: BBOM/350J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAWIRE PAUL MISIKO ADM NO: BBOM/320J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: PETER ONDITI SYLAS ADM NO: BBOM/360J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPCHUMBA CORNELIUS ADM NO: BBOM/323J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NGETICH SAMMY KIPROTICH ADM NO: BSMF/124J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DORIS MAJHALA MTONGOLO ADM NO: BADS/0038/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DAISY AWOUR OJWEKE ADM NO: BADS/0017/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NELLY KAHUNDA CHANGAWA ADM NO: BADS/0011/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JULIUS MENZA KATANA ADM NO: BADS/0033/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SALIM FATMA KHALID ADM NO: BTMA/132J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHEMELIL NEWTON KIBET ADM NO: BTMA/105J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KADZO DORIS MASHA ADM NO: BTMA/129J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPTANUI JOY JEPKEMEI ADM NO: BTMA/145J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SALIM ABDULHALIM SALIM ADM NO: BTMA/0029/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OMONDI TONNY ONYANGO ADM NO: BTMD/189J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MURANGIRI ROGERS ADM NO: BTMD/159J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OILE PARSLEY ALVIN ADM NO: BTMD/124J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAMBUA W YOMA ADM NO: BTMD/105J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MAINGI MEHETABEL NDUTA ADM NO: BTMD/151J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SINDIYO DORIS DAMA ADM NO: BTMD/172J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LINET ACHIENG OKEYO ADM NO: BTMD/185J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAFULA LINDA NAKHANU ADM NO: BTMD/166J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUNYAO M. NGUSYE ADM NO: BTMD/160J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MACHARIA NJOROGE FRANCIS ADM NO: BTMD/148J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAVILA NELLY MUSANGI ADM NO: BTMD/153J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MULI ERIC MUTUNGA ADM NO: BTMD/161J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KENGA ESTHER PATO ADM NO: BADS/012J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWENDWA MARK KELI ADM NO: BSDS/124J/2016
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANIA PURITY KALUKI ADM NO: BADS/008J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KWAMBOKA LONAH ONGARO ADM NO: BADS/002J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ABONGO MAUREEN AUMA ADM NO: BADS/021J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OMONDI LOISE GEORGINA ADM NO: BADS/025J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OUMA WANDERA PETER ADM NO: BADS/020J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MAINA KAREN WAMBUI ADM NO: BIS/058J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MENJO KIPKEMBOI VICTOR ADM NO: BIS/100J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: THERI DICKSON KARIUKI ADM NO: BIS/062J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ELIZABETH NAMUSONGE JNR ADM NO: BIS/141J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MELVIN KEGEHI ADM NO: BIS/082J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NDUNGU NJERI FRIDA ADM NO: BIS/087J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JUMAA BAKARI ADM NO: BIS/052J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUIRURI HELLEN NJOKI ADM NO: BIS/085J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: THOMAS KITHUSI NYAMAI ADM NO: BIS/060J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MULONGO TIMOTHY WEKESA ADM NO: BIS/093J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GAKII M AKIIRU ADM NO: BIS/091J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OLOLA LUZMERCY AUMA ADM NO: BIS/080J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LAMECK ONGONDO KIYAKA ADM NO: BIS/113J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALVIN OMWOYO NYAATA ADM NO: BIS/084J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BRIAN ODHIAMBO OWINO ADM NO: BIS/118J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JUMAA BAKARI ADM NO: BIS/052J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPKORIR MARK ADM NO: BIS/099J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NJOROGE JACKSON WANJAGI ADM NO: BIS/124J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OLWANGU DAVID ADM NO: BIS/104J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIMUTAI NGETICH ALAN ADM NO: BIS/095J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JOSPHAT OLINDI ADM NO: BIS/108J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAWERU JAMES WARUINGI ADM NO: BIS/088J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHORE JOSHUA ONYANGO ADM NO: BIS/109J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPKORIR MARK ADM NO: BIS/099J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MBINGU JOSHUA MWANDAVI ADM NO: BSMF/143J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAITHIRA JAMES GITARI ADM NO: BARC/135J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIMATHI FIONA JANE ADM NO: BBJ/174J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JOHN FATHER SMALL ADM NO: BBJ/191J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NDERITU IRENE WANJIKU ADM NO: BBJ/159J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FRANCISCA NAMANI OUMA ADM NO: BARC/076J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HELLEN WAMUCII KIRITU ADM NO: BARC/098J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KASYOKI JOSEPH ADM NO: BARC/143J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOREEN KATHURE ADM NO: BAS/008J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOSETI DENIS ADM NO: BAS/011J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MARGARET WAIRIMU GICHANE ADM NO: BBA/0643/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LUIZA KAVINI NGILA ADM NO: BBA/0665/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RAJAB A MCHOMVU ADM NO: BBA/478J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUNZAA PHILOMENA ADM NO: BBA/499J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUTUA CAROLINE MUKUI ADM NO: BBA/508J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KUNG'U MERCY WAMBUI ADM NO: BBA/520J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WANJALA NAMULEKHWA CECILIA ADM NO: BBA/536J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: ADODI RITA AKINYI ADM NO: BBA/543J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: APONDO MICHAEL OMOLLO ADM NO: BBA/551J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OUMA MICHAEL ADM NO: BBA/558J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OTIENO JULIUS OPON ADM NO: BBA/568J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: VERONICA NYANCHAMA MABEYA ADM NO: BBA/574J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HARUN MAULID ABDI ADM NO: BBIT/0073/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANGI IRUNGU ROBERT ADM NO: BBIT/572J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NGARE LUKAS MUNENE ADM NO: BBIT/601J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIROYIAN OLTIBILI ADM NO: BBIT/605J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIRIRI JAMES KINYANJUI ADM NO: BBIT/606J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HAMISI BAKARI DZIMWENGA ADM NO: BBIT/608J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NJOKI BRIAN MAINGI ADM NO: BBIT/610J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MBURU DANIEL ADM NO: BBIT/613J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RWITO MURITHI NICHOLAS ADM NO: BBIT/621J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AMWAYI NEVILLE ADM NO: BBIT/628J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ARUDA J ELVIS ADM NO: BBIT/647J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OWOKO ACHIENG ADM NO: BBIT/650J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYAMBANE OMARI EDWIN ADM NO: BBIT/656J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: BARACK PETER ADM NO: BBJ/152J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: IYVONNE CHEROTICH ADM NO: BBJ/182J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MERCY CHEPNGETICH TOO ADM NO: BBJ/190J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: NYONGESA HENOCK MASIKA ADM NO: BBJ/193J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OPIYO BENEDICT ODHIAMBO ADM NO: BBJ/196J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Omware Rovins A. ADM NO: BBJ/208J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KUBWA NAYLAH MOHAMED ADM NO: BBOM/293J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
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COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANGI DENNIS KARIUKI ADM NO: BBOM/295J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NZYUKO MOSES MUINDI ADM NO: BBOM/306J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MBESA DANIEL MBITHI ADM NO: BBOM/308J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAWIRE PAUL MISIKO ADM NO: BBOM/320J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LUCY WANGA ADM NO: BBOM/336J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NICHOLAS ODUOR OMONDI ADM NO: BBOM/355J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NDUNGU HARRISON KIRONYO ADM NO: BBOM/364J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DAUDI MAX WAMBUA ADM NO: BBOM/367J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUTUA KELVIN MUSYOKI ADM NO: BCOM/0856/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: VICTORIA MUMO MULWA ADM NO: BCOM/0948/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: EMMACULATE NANYAMA SIMIYU ADM NO: BCOM/0963/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DENIS THEURI ADM NO: BCOM/273J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ANNARITA ESTHER NASIMIYU ADM NO: BCOM/376J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ONYANGO CALVINS OMONDI ADM NO: BCOM/409J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ANNET WANGUI PUTANI ADM NO: BCOM/483J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SIMBA GEOFFREY MURITHI ADM NO: BCOM/493J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: TOO MILLICENT CHEMATIA ADM NO: BCOM/505J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MASESE AKELO CELESTINE ADM NO: BCOM/539J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RONNIE KIEYA ADM NO: BCOM/542J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Abubakar Ahmad Omar ADM NO: BCOM/555J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Cornelius Muli Wambua ADM NO: BCOM/556J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MAINA BENSON MUTHII ADM NO: BCOM/566J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FATMA BWANAREHEMA ALI ADM NO: BCOM/568J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NDIKA AMATOYA EMMANUEL ADM NO: BCOM/576J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OKINDA BISMACK OKOTH ADM NO: BCOM/577J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OTIENO BENJAMIN OMOLO ADM NO: BIS/005J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GACHAU ESTHER NDUTA ADM NO: BIS/061J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIMANZI JANET MANGA ADM NO: BIS/068J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHEBICHII BUSHRA ADM NO: BIS/078J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LILUMBI DERRICK MAKHANJI ADM NO: BIS/081J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KARUNGU KEN KURIA ADM NO: BIS/089J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUTHONI MARGARET NJERI ADM NO: BIS/090J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BONFACE GEKONGE BORIGA ADM NO: BIS/116J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RUSHEL DILLY ONYANGO ADM NO: BIS/123J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ATEKA CONELIOUS MAEBA ADM NO: BIS/125J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AKINYI JACKLINE OTIENO ADM NO: BIS/129J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OCHIENG IAN BANJA ADM NO: BIS/137J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OCHIEN'G COLLINS ODUNDO ADM NO: BJMC/079J/2015
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MURITHI KEN ADM NO: BJMC/107J/2016
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DANCAN MUSAKHI ONG'ANYO ADM NO: BJMC/162J/2016
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GICHUHI TRESSY GATHONI ADM NO: BJMC/350J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYUTU ANNE WAMBUI ADM NO: BJMC/355J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: STALON OMONDI ADM NO: BJMC/370J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: EDWIN WANYAMA WACHALA ADM NO: BJMC/375J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODHIAMBO CECIL ADM NO: BJMC/390J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAVOMBA BONFACE MASIBO ADM NO: BMCS/140J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FESTUS DANIEL MUSUNZA ADM NO: BMCS/253J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HEMSTONE SMITH ONDIEK ADM NO: BMCS/284J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Ringera Jesse Mutembei ADM NO: BMCS/293J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWAMBURI ZALIAH MANDI ADM NO: BMFT/143J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAITA NOAH METUMI ADM NO: BMFT/144J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: IKATAI ERICK NGUI ADM NO: BMFT/145J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAFULA HERBERT KAKAI ADM NO: BMFT/148J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MAIRU JULIUS GITHINJI ADM NO: BSDS/247J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LESLIE GUSERWA ANGU ADM NO: BSEE/0117/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALI SALIM ABDULRAZAK ADM NO: BSEE/0132/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: IMMANUEL JUNIOR OYUGI ADM NO: BSEE/0140/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOHAMMED KHALIF ADAN ADM NO: BSEE/0143/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AUSTIN MUGENDI KARANGA ADM NO: BSEE/0144/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ABDULJABAR MOHAMMAD MADEY ADM NO: BSEE/0147/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LUQMAN ANWAR SAID ADM NO: BSEE/0155/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JEREMIAH MWENDWA MBITHI ADM NO: BSEE/0159/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JEREMIAH MULINGE MUENDO ADM NO: BSEE/0167/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CALEB RUTO LOKWALEKEM ADM NO: BSEE/0190/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: COLLINS MACHUKA OMBWORI ADM NO: BSEE/0219/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GATUMIA D MARITE ADM NO: BSEE/129J/2016
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ONGUBO ALISTER SIGA ADM NO: BSEE/131J/2016
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LOKAPEL JULIUS ADM NO: BSEE/151J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OWUOR LEVIS ADM NO: BSEE/182J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OTARA OMARE JOSEPH ADM NO: BSEE/183J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JEREMIAH LEMERIA ADM NO: BSEE/185J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OWINO RACHAEL AKINYI ADM NO: BSEE/187J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KEYA SHAIBU MUKOYA ADM NO: BSEE/189J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODHIAMBO MAURICE ANYANGA ADM NO: BSEE/197J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALEXANDER MWITA GAIRIGI ADM NO: BSEE/198J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUKOYA HOSEA KONGANI ADM NO: BSEE/203J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LESUUDA LJAMANI ADM NO: BSEE/207J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: REMMY KIPYEKO BERA ADM NO: BSEE/208J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SHERILYNE CHEPKIRUI KOECH ADM NO: BSEE/215J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OTIENO JOSEPH OWINO ADM NO: BSEE/218J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GILBERT KIPKORIR BWALEY ADM NO: BSEE/220J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MURITHI E NTONJA ADM NO: BSEE/226J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: PANCRUS ATHUMAN ADM NO: BSEE/234J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NGANDU KEVIN MUCHEMBE ADM NO: BSEE/235J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ONDISA MILLICENT ADM NO: BSEE/240J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LUVUSI SHARON KHALEHA ADM NO: BSEE/242J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHELANGAT BRENDA KORIR ADM NO: BSEE/244J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OCHIENG JEANNETTE BRENDAH ADM NO: BSEE/245J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MBAUNI MWANGI ANTONY ADM NO: BSEE/249J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MIRING'U WINNIE RUGURU ADM NO: BSEE/251J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ONDIAYO DENIS SIMIYU ADM NO: BSEE/256J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOIPEI JOY MALIA ADM NO: BSEE/262J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: IRUNGU DENNIS MWANGI ADM NO: BSEE/263J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KISILU KELVIN MUTINDA ADM NO: BSEE/271J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LAWRENCE KIPROTICH ADM NO: BSEE/275J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ELVIN KIPRONO KIRUI ADM NO: BSEE/276J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MERCY CHEPKEMOI KOECH ADM NO: BSEE/277J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DANCAN KIPKORIR LANGAT ADM NO: BSEE/279J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ABIGAEL CHEPNGETICH TONUI ADM NO: BSEE/280J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NAINI MACKLINE ADM NO: BSEE/283J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MATHIAS WILLY ADM NO: BSEE/289J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OCHIENG ANYANGO DAPHINE ADM NO: BSEE/291J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ONGIYA GREGORY K ADM NO: BSEE/295J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Kinyua Maureen Makena ADM NO: BSEE/312J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Michael Kavila Mulwa ADM NO: BSEE/313J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPTOO GIDEON ADM NO: BSFQ/335J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ESEME BRAMUEL ADM NO: BSFQ/336J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OPIYO VALENTINE ADM NO: BSFQ/340J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAMUYU WILFRED WAWERU ADM NO: BSIT/247J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWACHIRO NYALE KITI ADM NO: BSIT/272J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NJINO KELVIN NJAU ADM NO: BSIT/274J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NDIRANGU JOSEPH GITHIMII ADM NO: BSIT/278J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MULWA SHYREEN MUENI ADM NO: BSIT/295J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUSILI PETER MUTUKU ADM NO: BSIT/297J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUSYOKA PRINCE IMMANUEL ADM NO: BSIT/299J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANGI BEDAN MUREITHI ADM NO: BSIT/306J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAMAU GRACE WANGUI ADM NO: BSIT/321J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RONO KIMUTAI GIDEON ADM NO: BSIT/326J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CAREN JEBET KIVOI ADM NO: BSIT/330J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JOASH ONGUBO ROBERT ADM NO: BSIT/332J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: EVANS AJALA ADM NO: BSIT/333J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KEVIN JUMA ADM NO: BSIT/341J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYANDORO MANONO BRIAN ADM NO: BSIT/346J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BRENT BARAKA CHIMBA ADM NO: BSIT/349J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OWUOR ZEDDY OTIENO ADM NO: BSIT/359J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOMANYI MORARA MISHAEL ADM NO: BSIT/363J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CATHERINE STACY O. ADM NO: BSIT/370J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Ng'ang'a Francis Njenga ADM NO: BSIT/372J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ANNE MORAA OMBUKI ADM NO: BSIT/378J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIMANI STEPHEN ADM NO: BSIT/392J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OSIMBO WILLIS OCHIENG ADM NO: BSIT/394J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: PRISCILLA SARU ADM NO: BSMD/0036/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: EBBY ARINDA LARI ADM NO: BSMD/0050/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DORIS DANIELLE ATIENO ADM NO: BSMD/136J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIMANI FELIX KANJA ADM NO: BSMD/147J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HILLARY KIPROTICH BETT ADM NO: BSMD/152J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MULI JAMES KASYOKI ADM NO: BSMD/153J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SHARON CHEPKEMOI ADM NO: BSMD/164J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SABASTIAN ONDIEKI CHRISTOPHER ADM NO: BSMD/165J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OLILA HEZRON OKINYI ADM NO: BSMD/166J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JUNES CHEBET ADM NO: BSMD/177J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NGURE VANESSA NYAMBURA ADM NO: BSMD/185J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPRONO AMOS ADM NO: BSMD/187J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: MICHAEL MWIRIGI KINYUA ADM NO: BSMD/189J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPLANGAT VICTOR SANG ADM NO: BSMD/197J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHEPKEMOI FANCY ADM NO: BSMD/198J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GLADYS JEROBON ADM NO: BSMD/200J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LIVINGSTONE KAMAU ADM NO: BSMD/205J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPCHIRCHIR KORIR ADM NO: BSMD/206J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WINROSE CHEBET ADM NO: BSMD/209J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPRONO GIDEON ADM NO: BSMD/210J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: IBRAHIM ONYANGO OWINO ADM NO: BSMD/212J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: WAROIRO KENNEDY SAIDIMU ADM NO: BSMD/213J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OTIENO BENARD OKOTH ADM NO: BSMD/216J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: WETOYI SULEIMAN ADM NO: BSMD/218J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: WANYONYI D.DERICK ADM NO: BSMD/219J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODHIAMBO MANASE BRANDON ADM NO: BSMD/221J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODUOR ODHIAMBO MOVIN ADM NO: BSMD/223J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OLOO B EDDY ADM NO: BSMD/226J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: PETER CHANGERA MIKEN ADM NO: BSMD/228J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Wanyoike Francis Murigi ADM NO: BSMD/231J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Nganga Lisper Wamboi ADM NO: BSMD/232J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LUSIGI BRAMWEL ADM NO: BSMD/237J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MELLY KIPKORIR ABRAHAM ADM NO: BSME/113J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NGANGA MICHAEL KIMANI ADM NO: BSME/140J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OTIENO RASHID JUMA ADM NO: BSME/148J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WARUI JACOB MURIITHI ADM NO: BSME/165J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WANYONYI SILAS FUCHAKA ADM NO: BSME/169J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JOYLINE JEBOTIP ADM NO: BSME/172J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KABURU N FRANCO ADM NO: BSME/180J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPTOO WALTER KOSGEI ADM NO: BSME/192J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWIMBI ROSELYNE KENDI ADM NO: BSME/200J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KEMBOI BELINDA JEPTOO ADM NO: BSME/203J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LIVINGSTONE MUVULUCHI ADM NO: BSME/206J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NJUGUNA EDWIN MUIGAI ADM NO: BSME/216J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALICE WAKARIA KARIUKI ADM NO: BSME/217J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NZIOKI MESHACK MWANZIA ADM NO: BSME/225J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUTINDA EMMANUEL SYENGO ADM NO: BSME/229J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUTINDA BENEDICT MUSEMBI ADM NO: BSME/231J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUGENDI STELLA KINYA ADM NO: BSME/233J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NZAU MATIA ADM NO: BSME/235J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: VICTOR KOECH ADM NO: BSME/241J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPLANGAT IAN ADM NO: BSME/243J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIBAKI JOSEPH NJOGU ADM NO: BSME/247J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPKOECH MESHACK ADM NO: BSME/253J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPKURUI KEVIN KOECH ADM NO: BSME/254J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KOECH KELVIN ADM NO: BSME/259J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JELAGAT DEBORAH ADM NO: BSME/265J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NIXSHON OTIENO OTHOO ADM NO: BSME/272J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NIXON KIPROTICH ADM NO: BSME/279J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HENRY MUNENE IRERI ADM NO: BSME/280J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPYEGON ENOCK RONO ADM NO: BSME/281J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Kiprotich Alex ADM NO: BSME/282J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NDUMIA SAMUEL NDERITU ADM NO: BSMF/100J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: WANGILA W JOSEPH ADM NO: BSMF/136J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWADZUGWE SULEIMAN HASSAN ADM NO: BSMF/152J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GATHIMBA PETER GITHENDU ADM NO: BSMF/155J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MURIITHI K. PAUL ADM NO: BSMF/157J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OGENCHE AYUNGA ZEDEKIAH ADM NO: BSMF/181J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAMAU JAMES WAITHAKA ADM NO: BSMF/205J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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For: **TAKAFUL INSURANCE OF AFRICA**
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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KINOTI ROY MAINGI ADM NO: BSSC/154J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MARINGA O BONIFACE ADM NO: BSSC/175J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OMOTO OPIYO LINDSEY ADM NO: BSSC/215J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ZABLON OSORO ABUYA ADM NO: BSSC/221J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NJOROGE PAUL KAMAU ADM NO: BSSC/274J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWENDA BRIAN ADM NO: BSSC/281J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NZIOKA STEPHEN MUNYAKA ADM NO: BSSC/310J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MAINA PETER WAMBUGU ADM NO: BSSC/330J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUSYOKA A. MUTISO ADM NO: BSSC/345J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ARNOLD ADENYA MIDO ADM NO: BSSC/353J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: NEKESA KHISA FAITH ADM NO: BSSC/354J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPKOGEI TIMOTHY ADM NO: BSSC/358J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: IDDA ARROYO ALLEM ADM NO: BSSC/362J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPROTICH GIDEON ADM NO: BSSC/365J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPTALLAM JEPNGETICH BRIGID ADM NO: BSSC/370J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WABOMBA KHISA EMMANUEL ADM NO: BSSC/376J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALLAN MATECHE ADM NO: BSSC/383J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SASITA TOILI ADM NO: BSSC/384J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OMONDI AUSTINE TEVIN ADM NO: BSSC/400J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODHIAMBO JOHN ALUMA ADM NO: BSSC/404J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OMBUI HAMISI ADM NO: BSSC/406J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: KINYOSI JOHN NYANG'AU ADM NO: BSSC/407J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODIWUOR EDDY DULO ADM NO: BSSC/409J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RACHILO BRIAN OTIENO ADM NO: BSSC/410J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Emanuel Kipruto ADM NO: BSSC/416J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AGUMBI RAPHAEL MUTUKU ADM NO: BSTM/595J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MAINA GLADYS NJOKI ADM NO: BSTM/643J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANTHI GLORIA LISI ADM NO: BSTM/654J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KANAYA CIBRIL ADM NO: BSTM/659J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHEBET JEPKEMOI GLORIA ADM NO: BSTM/674J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: EVANS OWINO ADM NO: BTAC/153J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ATEMBA LINUS WESONGA ADM NO: BTAC/179J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUCHIRI RACHAEL WANJIRU ADM NO: BTAC/212J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANIA IAN KIAMBA ADM NO: BTAC/227J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GITERU JOHN MACHARIA ADM NO: BTAC/231J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MCKNIGHT KIBET ADM NO: BTAC/233J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WILLIAM LUMBASI ADM NO: BTAC/241J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OSIKEH MICHELLE APONDI ADM NO: BTAC/244J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHEBOI JEPKORIR NATALIE ADM NO: BTAC/247J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MACHUKI ORINA COSMUS ADM NO: BTAP/055J/2016
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NDWIGA VINCENT MURIMI ADM NO: BTAP/221J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPROP K MAXMILLIANO ADM NO: BTAP/229J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPKEMEI ABISHAI ADM NO: BTAP/231J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AMOS KIPKURUI MUTAI ADM NO: BTAP/234J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ADAMS SAKWA ADM NO: BTAP/242J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUSUNGU KHASANDI CELINE ADM NO: BTAP/243J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOMANYI PIUS ADM NO: BTAP/252J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ONYANGO BYRON ODONGO ADM NO: BTAP/259J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYORO DANIEL MWONGA ADM NO: BTAP/265J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GIDEON KIPKORIR ADM NO: BTCE/203J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HEZEKIAH KIPKIRUI ADM NO: BTEE/127J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: COLLINS OTIENO ADM NO: BTEE/137J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAMAU GEOFFREY NJAGUA ADM NO: BTEE/148J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUCHIRA ANGELAS MUTHIKE ADM NO: BTEE/149J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MESHAKI SHAKE ADM NO: BTEE/180J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KELVIN MWITI ADM NO: BTEE/196J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPKIRUI TONUI VICTOR ADM NO: BTEE/204J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALAN KIPLANGAT KIMETO ADM NO: BTEE/206J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPROP JOHN BARAKA ADM NO: BTEE/212J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIBET GILBERT ADM NO: BTEE/214J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KOECH KIPRONO FREDRICK ADM NO: BTEE/220J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DAVID OTIENO ODHIAMBO ADM NO: BTEE/232J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NDEDE PAUL ODHIAMBO ADM NO: BTEE/234J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KERRY FRANCIS ODHIAMBO ADM NO: BTEE/235J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OMONDI .O. SOLOMON ADM NO: BTEE/236J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Lokicha Micah Mwang'at ADM NO: BTEE/248J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Denis Kipchirchir ADM NO: BTEE/251J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WANGARI D. MWANGI ADM NO: BTEE/253J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BRIAN NGOTE ADM NO: BTHM/158J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUTINDA JAMES MUSYOKI ADM NO: BTHM/184J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AMOS KOKI MUKONESI ADM NO: BTHM/208J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODIRA MILTONE ORWA ADM NO: BTHM/217J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NIXON KIPNGETICH ADM NO: BTIT/259J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JUMANNE HAMIS KANGAGHA ADM NO: BTIT/360J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHEGE EVANSON KAMAU ADM NO: BTIT/368J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANGI GRACE NJERI ADM NO: BTIT/369J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUNENE BENSON KURIA ADM NO: BTIT/372J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MAIRURA VENICK NYANGWESO ADM NO: BTIT/380J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MULUMBI TONNY MULWA ADM NO: BTIT/395J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHEPTEI VALARY FEMI ADM NO: BTIT/401J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KARIUKI STEPHEN WAITHAKA ADM NO: BTIT/418J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AGNES RIZIKI VICTOR ADM NO: BTIT/419J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KORIR KIPCHUMBA BRIAN ADM NO: BTIT/421J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LUCHELI MARYSE MUKANDA ADM NO: BTIT/429J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BULUMA KEVIN RAISI ADM NO: BTIT/430J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MASOKA BRIAN RATEMO ADM NO: BTIT/443J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWAGANDA MOSES MWAMBURA ADM NO: BTIT/444J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: REAGAN ONYANGO ADM NO: BTIT/446J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Allan Leboo Lenayiarra ADM NO: BTIT/474J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OCHUODHO SIMON OKOTH ADM NO: BTIT/484J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYARANI NYABOKE FAITH ADM NO: BTIT/486J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOHAMED RUMAISA KHALIFA ADM NO: BTMA/130J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OKEYO ODIWUOR GIVON ADM NO: BTMA/143J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPKEMBOI ALEX ADM NO: BTMA/144J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GATHU ANGELA NYAMBURA ADM NO: BTMA/146J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPKORIR VICTOR ADM NO: BTMA/148J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUMBA W. ROBERT ADM NO: BTMA/149J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DAVID ANDRIKOR MULIKA ADM NO: BTMA/153J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SIMON P. WANYONYI ADM NO: BTMB/033J/2013
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GATHIOMI CORNELIUS KAMAU ADM NO: BTMB/198J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NDIRITU IAN MAINA ADM NO: BTMD/150J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KINUTHIA FLAVIAN MWAURA ADM NO: BTMD/152J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WACHIRA CAROLINE MUKAMI ADM NO: BTMD/162J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: IFEDHA JULIUS ADM NO: BTMD/167J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPLIMO JOEL joel ADM NO: BTMD/169J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIBAKI CATHERINE NJERI ADM NO: BTMD/173J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MACHUKI STELLA MORAA ADM NO: BTMD/175J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAFULA DAVID WACHEMBA ADM NO: BTMD/180J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OTIENO WYCLIF ADM NO: BTMD/183J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OBONDO BARAKA STEPHEN ADM NO: BTMD/191J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OLIMA JEMIMA ACHIENG ADM NO: BTMD/193J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JUSTIN MURIUKI ADM NO: BTMD/196J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JONATHAN KIBIWOT ADM NO: BTME/060J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JAMES NDUNDA ADM NO: BTME/088J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIRWA DENNIS na ADM NO: BTME/111J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: ANTONY NYONGO HIUHU ADM NO: BTME/130J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MASINDE VICTOR KASIRE ADM NO: BTME/136J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WANJOHI ERASTUS GICHANGO ADM NO: BTME/140J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GATITU RAHAB NJOKI ADM NO: BTME/148J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MACHARIA PIUS GACHUGU ADM NO: BTME/160J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUNGAI EDWIN NGANGA ADM NO: BTME/162J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GITONGA HUMPREY ADM NO: BTME/165J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWARIA EVANS KITHAKA ADM NO: BTME/166J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIBET GILBERT ADM NO: BTME/169J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHEROTICH DAISY ADM NO: BTME/170J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JAMES NGUGI KINYUA ADM NO: BTME/172J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: EMMANUEL AFUBWA ADM NO: BTME/173J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DERRICK KIPKORIR ADM NO: BTME/175J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPTOO DALMAX SIELE ADM NO: BTME/177J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KUSIMBA BRUCE SIMIYU ADM NO: BTME/182J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANIKI HIRAM KIMANTHI ADM NO: BTME/184J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JOHN EMMANUEL ODWALI ADM NO: BTME/186J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ATINDA JACKTON ADM NO: BTME/187J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OKARI DANCAN ADM NO: BTME/192J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OGUTU EDWIN OTIENO ADM NO: BTME/194J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ONDUKO KINANGA MICHAEL ADM NO: BTME/202J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Otieno Joash Obiero ADM NO: BTME/206J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LALJI MARCELO A ADM NO: BTME/209J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIRARUGA REUBEN GITHAIGA ADM NO: BTRE/099J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WANJERO BENFELLTOR KOGI ADM NO: BTRE/151J/2017
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANGI KEVIN GATUNDU ADM NO: BTRE/179J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OPIYO OUMA ERICK ADM NO: BTRE/180J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MAINA GODWIN G ADM NO: BTRE/202J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NJEHYA COLLINS NJOGU ADM NO: BTRE/213J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: VINCENT NDAMBIRI MEHTA ADM NO: BTRE/214J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OCHAKO PHENIC MORAA ADM NO: BTRE/215J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MAXWELL MWENDA ADM NO: BTRE/220J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MAKAU CHRIS ADM NO: BTRE/227J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANGI ANDREW KAMAU ADM NO: BTRE/229J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MBALO KENNEDY ADM NO: BTRE/230J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
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COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: GITIJE VICTOR KIMATHI ADM NO: BTRE/237J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUNGATIA T MURIIRA ADM NO: BTRE/238J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIVINDYO JUSTUS MUTUNGA ADM NO: BTRE/243J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NOEL MWANDOE KISAKA ADM NO: BTRE/246J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AKOTO LINC PHILIP ADM NO: BTRE/247J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHERONO LINZY ADM NO: BTRE/249J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPROP SILVESTER ADM NO: BTRE/254J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUTAI RONALD KIPCHUMBA ADM NO: BTRE/258J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NKUNJA KEN RASHID ADM NO: BTRE/260J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: PETER MWANGI MBUTHIA ADM NO: BTRE/262J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAJOGO CHRIS NJOE ADM NO: BTRE/268J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPTANUI DENIS ADM NO: BTRE/271J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LEMAIYIAN JOHN SAITOTI ADM NO: BTRE/277J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WILLIAM ANTONIO SORE ADM NO: BTRE/280J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ANDIEMA KEMBOI PETER ADM NO: BTRE/282J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SIMIYU DERRICK ADM NO: BTRE/283J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KOFIA SCHEEFER ADM NO: BTRE/284J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYAKIONGORA TREVOR ADM NO: BTRE/286J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WASIKE IAN NATEMBEA ADM NO: BTRE/287J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OMOLLO AUSTINE AYAKO ADM NO: BTRE/288J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OCHIENG BRADLY K ADM NO: BTRE/289J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ABUGA BOSIRE JUSTINE ADM NO: BTRE/292J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SIMON SHALOM DANDE ADM NO: BTRE/296J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MAXWELL ODOYO ONYANGO ADM NO: BTRE/300J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MAKAU BRIAN MUTISO ADM NO: BTRE/303J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AUDRINE VENESA AMIN ADM NO: BTRE/305J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BROVINCE OCHIENG OGOT ADM NO: BTRE/306J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MARY BISIERI NZOMU ADM NO: DACC/0519/2022
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NZOMO STEPHEN MUTISYA ADM NO: DACC/321J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MANANI BRIAN MICHIEKA ADM NO: DCE/033J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: EMILY MUKIRI GATURA ADM NO: DCS/0043/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LENOX ALEX OMBWAYO ADM NO: DCS/092J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CAROLINE MOKEIRA NYAENYA ADM NO: DCS/101J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MESHACK KORI M ADM NO: DCS/121J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AWADH MOHAMMAD ABDILLAH ADM NO: DCS/122J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MURITHI MUGAMBI DERRICK ADM NO: DCS/129J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NGATIA CHARLES GITAH ADM NO: DCS/130J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUCHERU KIMANI BENSON ADM NO: DCS/144J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUMO MUTISYA I ADM NO: DCS/147J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: JUSTIN NTOITHA MUTHURI ADM NO: DCS/153J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAGENDO REGINA ADM NO: DCS/154J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUMO TITUS DORCAS ADM NO: DCS/157J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FRANKLYNE KEN NAMAYI ADM NO: DCS/177J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KIPRUTTO CHESIR RAYMAN ADM NO: DCS/179J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SAMUEL WEKESA WANYONYI ADM NO: DCS/180J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AKHONYA LENOX ADM NO: DCS/182J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SWARA GESANDA IBRAHIM ADM NO: DCS/190J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MACRAY BILLY ADM NO: DCS/198J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CERULLO OCHIENG MORRIS ADM NO: DCS/200J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ELIAS OMONDI BARRACK ADM NO: DCS/206J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FAIYADHI AWADH MUUSTASWIM ADM NO: DCS/207J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: ZULKHEIR SALIM ALI ADM NO: DCS/212J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JOSEPH MWANGI GITAU ADM NO: DCS/230J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: INVIOATE ANDIELS MULESHE ADM NO: DGD/416J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: PATRICIA CHEGE WANGECHI ADM NO: DGD/437J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HASNA ROBA GOLICHA ADM NO: DHRM/0536/2022
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KUTEKHA SHELDOM SHIKHUYU ADM NO: DICT/0601/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ZAYDA ALI ABBAS ADM NO: DICT/0620/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JOSHUA IMANI MUNUVE ADM NO: DICT/0650/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ABDULKADIR HASSAN SHEBA ADM NO: DICT/0652/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JACKSON MUTA NDIRANGU ADM NO: DICT/0653/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MOHAMED HASSAN MOHAMED ADM NO: DICT/0674/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OWUOR GEOFFREY BENJAMIN ADM NO: DICT/188J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ABDALLAH MWACHIVUMA BAKARI ADM NO: DICT/477J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUNDIA NG'ANG'A PAUL ADM NO: DICT/489J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODOYO OUMA RAWLINGS ADM NO: DICT/516J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHERONO ROTICH IVETTE ADM NO: DICT/520J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BRIAN SIMIYU WANJALA ADM NO: DICT/526J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BENARDINE JEBIWOTT ADM NO: DICT/527J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUKOLWE OSIDE PEIFFER ADM NO: DICT/541J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ODHIAMBO ADHIAMBO CATHERINE ADM NO: DICT/552J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LAWRENCE WACHIRA WAMUCHI ADM NO: DICT/559J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MSHAMBALA PHILISIAH SHANGI ADM NO: DICT/590J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AISHA JUMAA ADM NO: DMAC/0482/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KARHAYU ELIAS SIMON ADM NO: DMAC/0564/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ESTHER UMAZI CHIRO ADM NO: DMAC/0565/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HAFSA JUMA HAMISI ADM NO: DMAC/0590/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SHAMIM MUSA BAKER ADM NO: DMAC/0641/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NICHOLUS OMONDI OCHIENG ADM NO: DMAC/0642/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: REHEMA KAZUNGU MASHA ADM NO: DMAC/0644/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DENNIS OPIYO ODUORI ADM NO: DMAC/0651/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: YOUNKER RON DUPREEZ ADM NO: DMAC/0655/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RABECCA MUKAMBE LEWA ADM NO: DMAC/0656/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HAWAA RAMADHAN JUMA ADM NO: DMAC/0658/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BONIFACE MUTHWII MUSYOKI ADM NO: DMAC/0660/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NICHOLAS OMONDI ACHIENG ADM NO: DMAC/0663/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAFULA STANLEY WANJALA ADM NO: DMAC/0667/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KWEMOI EDWIN KWALIA ADM NO: DMAC/0669/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SOPHIA HASHIM NDONYE ADM NO: DMAC/0675/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



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AUTHORISED OFFICER

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NICHOLAS MUTHOMI KINOTI ADM NO: DMAC/0676/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MWANASITI SALIM ABUBAKAR ADM NO: DMAC/0677/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KHADIJA MWASYA KIOKO ADM NO: DMAC/0680/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ERIC MBWIKA MUTHIANI ADM NO: DMAC/0681/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

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For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WENDY ATIENO ODUOR ADM NO: DMAC/0682/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ABDIRAHMAN ABDULLAHI OSMAN ADM NO: DMAC/0685/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HASNA ABDI IBRAHIM ADM NO: DMAC/0689/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: IAN MWASEMU JEW A ADM NO: DMAC/0690/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FAUSTO LUSEKAH IKOLOMANI ADM NO: DMAC/0693/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: VICTORIA WANJALA WAMBUA ADM NO: DMAC/0695/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FAITH KAVINDU MUTETI ADM NO: DMAC/0697/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HEZEL MWAKA KARISA ADM NO: DMAC/0699/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: Frank Machila Mzumbi ADM NO: DMAC/0702/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: FATMA SHAHAME AHMED ADM NO: DMAC/0704/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MELODY BONARERI ADM NO: DMAC/0709/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AWUOR ODUOR MOSES ADM NO: DMAC/266J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NYILE CYRUS MULINGE ADM NO: DMAC/356J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OWOUR AKINYI JACINTA ADM NO: DMAC/386J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MIREGWA MAXWELL ADM NO: DMAC/395J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALLAN KIPRUTO ADM NO: DMAC/430J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: UWIYERA LISAYINE DORCAS ADM NO: DMAC/466J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENT NAME/ADM NO.	NAME: KIMATHI NTINYARI CAROLINE ADM NO: DMAC/476J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WEST ORINDA TARIBO ADM NO: DMAC/479J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUKIRI EDNAH ADM NO: DMAC/482J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: RITA GAICHUGI ADM NO: DMAC/484J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JULIE MUGENDI KENDI ADM NO: DMAC/486J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OKEYO ADON KELLY ADM NO: DMAC/519J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: VINCENT ODIWUOR OTIENO ADM NO: DMAC/525J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DAISY AWUOR VERA ADM NO: DMAC/527J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NDUNG'U KIMANI SAMWEL ADM NO: DMAC/529J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



**For: TAKAFUL INSURANCE OF AFRICA
AUTHORISED OFFICER**

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WAIRIMU MWAURA JOY ADM NO: DMAC/531J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AGUTU OWINO MATHLIDA ADM NO: DMAC/533J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DENNIS MWAREMA GAZOHERE ADM NO: DMAE/0078/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: WILLIAM KINGSLEY OKINYI ADM NO: DMEN/0234/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ANN MUTHONI MAINA ADM NO: DPMM/0904/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: HANNAH MANYAMA MWANDISHA ADM NO: DPMM/1187/2022
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AMINA NYADZUA RUA ADM NO: DPMM/1189/2022
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MASIDZA BASIL OTIATO ADM NO: DPMM/387J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: CHARLOTTE KWAMBOKA BITANGE ADM NO: DPR/0049/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LENOX EDOYA ADM NO: DPR/0050/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OBUNGA CHELSEY ACHIENG ADM NO: DPR/362J/2020
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: KAMBUA NDUNDA CAROLINE ADM NO: DPR/400J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SHARON MAINA WANJIRU ADM NO: DPR/406J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: MUTSAMI MABIA ANDREW ADM NO: DPR/419J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: BARBRA MUHONJA ADM NO: DPR/421J/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: TOBIUS NDAMBUKI MWANZA ADM NO: DTEE/0423/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: AMOS NDONGA MUTUA ADM NO: DTEE/0497/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: NEWTON IJAGO ADM NO: DTEE/0624/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: SILAS BEJA YERI ADM NO: DTEE/0629/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ALKANAH MULONZYA KYEMBENI ADM NO: DTEE/0633/2021
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ORINDA ACHIENG ADM NO: DTEE/064J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: JOSEPH MUI MI MUTHENGI ADM NO: DTEE/0816/2022
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
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Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

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Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: ROPHUS MNYIKA MWAMODO ADM NO: DTEE/0818/2022
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: LUKANIA FRANSISCAH ADM NO: DTEE/200J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: DAVIS ORANGO MBUGA ADM NO: DTEE/353J/2019
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OCHOKOLO ODHIAMBO MOURICE ADM NO: DTIC/042J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>
Policy No.	P/GAR/2022/403/144298
ATTACHMENT PERIOD	3MONTHS

Date of Issue: 21/12/2022



For: **TAKAFUL INSURANCE OF AFRICA**
AUTHORISED OFFICER

COVER NOTE

The proposer, named in the Schedule, having proposed to **TAKAFUL INSURANCE OF AFRICA LTD** for insurance in respect of **GROUP PERSONAL ACCIDENT POLICY** is hereby held covered on the agreed terms and conditions against the risks described in the schedule for the period shown: -

Name of the Proposer	TECHNICAL UNIVERSITY OF MOMBASA P.O BOX 90420-80100 MOMBASA
STUDENTNAME/ADM NO.	NAME: OCHOKOLO ODHIAMBO MOURICE ADM NO: DTIC/042J/2018
Period	From: 03/01/2023 TO 02/04/2023
Class of Insurance	Group Personal Accident
Limits of Indemnity	<p><u>Benefit Limit</u></p> <p>Death - Kshs. 150,000/=</p> <p>Permanent Total Disablement - Kshs. 100,000/=</p> <p>Artificial limbs - Kshs 20,000/=</p> <p>Medical Expense - Kshs. 50,000</p> <p>Funeral Expenses -Kshs 20,000</p> <p>Private tuition - Kshs 5,000</p>