

DISCHARGE VOUCHER

Claims ref: SNM19202017C02/OCK

I/We, <u>Leong Tzeh Shi</u> of NRIC No. / Co Reg No. <u>S6984877Z</u>, agree to accept a sum of <u>\$ 7,138.29</u> (Singapore Dollars: Seven Thousand One Hundred Thirty Eight and cents Twenty nine only) to be paid to me /us as full and final settlement of all claims, costs, and disbursements for injuries/ damages sustained by me / us arising from the accident as specified below:

Involving vehicles: SFE4662R, SKA3035U & other

Date of accident : 06/05/2019

Total

Location of accident: <u>CLEMENTI RD TO WESTCOAST RD</u>

I/we agree that this payment is made without admission of liability on the part of China Taiping Insurance (Singapore) Pte Ltd, SHARIN BIN AHMAD (insured) and / or SHARIN BIN AHMAD (insured driver) and I/We also agree absolutely to discharge China Taiping Insurance (Singapore) Pte Ltd, SHARIN BIN AHMAD (insured) and / or SHARIN BIN AHMAD (insured driver) from all claims past, present and future in respect of all loss, injuries or damages sustained by me/ us arising from the accident mentioned above.

Signed by:	Shu-	
Company Stamp ((if any):	
Date :	1/12/19	
Settled amount co	mputed as below:	
Repair	\$ 6,581.89	
Loss of Rental	\$ 556.40	

\$ 7,138.29