

HUA MENG SPRAY PAINTING

1, Kaki Bukit Avenue 6 Blk C #01-34/#01-61, Singapore 417883 Tel: 6747 8064, 6746 5519 Fax: 6743 4896 H/P: 9666 9680

Reg. No.: 254678/00M



Your Ref :

Our Pef

AXA INSURANCE PTE LTD

Attn: Motor Claims Dept

ACCIDENT ON 03.03.2021 INVOLVING VEHICLE SLJ 8774 C & SHD 6900 Y ALONG **PUNGGOL WAY**

With regards to the above, we are writing on behalf of the registered owner of vehicle SLJ 8774 C which was involved in the above mentioned accident.

We are informed that the above accident was caused solely by the negligence of your insured vehicle SHD 6900 Y.As a result of the accident, our client's vehicle was damaged and our client had instructed us to submit his claims for loss and expenses, particulars of which are follows:

	Total	\$ 9,407.45
3) LTA search	<u>-</u>	\$ 7.45
2) Loss of rental-\$120 X 05 days		\$ 600.00
1) Repair cost		\$ 8,800.00

We hereby enclosed herewith the following documents for your consideration of the above claim.

a) Final Repair Bill Of SLJ 8774 C

c) LTA SEARCH

b) GIA report

d) Owner / Driver NRIC & Driving License

Yours faithfully,

HUA MENG SPRAY PAINTING WORKSHOP

噴 漆 厰 HUA MENG SPRAY PAINTING WORKSHOP AUTOBAY@KAKI BUKIT 1 KAKIBUKIT AVE 6 #01-34 SINGAPORE 417883 TEL: 6747 8064, 6746 5519 FAX: 6743 4896





HUA MENG SPRAY PAINTING WORKSHOP

1, Kaki Bukit Avenue 6 Blk C #01-34/#01-61, Singapore 417883 Tel: 6747 8064, 6746 5519 Fax: 6743 4896 H/P: 9666 9680

Reg. No.: 254678/00M



Your Ref :

Our Ref :

23/6/2021 Date:...

BILL TO : AXA INSURANCE PTE LTD

VEHICLE NO

:SLJ 8774 C

MAKE / MODEL

:VOLVO V40

NAME

:ANG SOON HENG

ADDRESS

:BLK 414 TAMPINES STREET 41

#09-317

S 520414

FINAL REPAIR BILL FOR VEHICLE NO:SLI 8774 C

TO SUPPLY AND REPLACE PARTS, LABOUR CHARGES FOR REPAIRING, KNOCKING, WELDING AND TO RESPRAY PAINTING (LUMPSUM REPAIR)

8,800.00

SINGAPORE DOLLARS: EIGHT THOUSAND EIGHT HUNDRED ONLY

SK052 330001 / KAN FOOK SING MOTOR WORKSHOP [417883] ENTRY DATE & TIME: 03/03/2021 14:33 (SGT) SUBMITTED BY: Ng Hui Kheng VERSION: 1 (03/03/2021 14:33 (SGT))

© SINGAPORE ACCIDENT STATEMENT

IMPOR TANT NOTICE

- IMPOR TANT NOTICE

 1. Please report correctly the details of the accident to speed up the claims process.

 2. This Form must be completed by the Policyholder and/or the Authorised Driver

 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate policy liability.

 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.

 5. Any false reporting may be referred to the Police for investigation.

 6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.

 7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

ACCIDENT STATEMENT

Date of Submission	02/02/0004 44:00 (0.07)
	03/03/2021 14:33 (SGT)
Date of Accident	03/03/2021 07:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PUNGGOL WAY
Country/State of Loss	Singapore
	. – -

Country/State of Loss	Singapore
DETAILS O	F OWN VEHICLE
Vehicle Registration Number	SLJ8774C
INSURED/POLICYHOLDER	
Is company? Name Of Registered Owner NRIC No Email Address Mobile Phone No Alternative Phone No	No ANG SOON HENG SXXXX470D shang0085@gmail.com (Phone) +65-96165287 +65-96165287
VEHICLE PARTICULARS	
Manufacturer Model Variant Exact purpose for which vehicle was being used at time of	Volvo V40
accident Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category	Employment No - Claiming third party Private car
INSURANCE COMPANY	
Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number	Liberty Insurance Comprehensive No SD20V15319
DRIVER	en de la companya de La companya de la co
Name of Driver NRIC No Date Of Birth Occupation	ANG SOON HENG SXXXX470D 20/06/1985 Indoor

Date of Driving Pass	12/12/2007	
Drivin g experience	13 YEARS AND 3 MONTHS	
Gender	Male	
Mobile Number	(Phone) +65-96165287	
Alt. Prone Number	+65-96165287	
Email Address	shang0085@gmail.com	
Addre SS	BLK 414 TAMPINES STREET 41 #09-317	
Addre ss complement	- DER 414 17/1911 INCO OTREET 41 #03-317	
Postc ode	520414	
Is the driver the policyholder?	Yes	
If No, Relationship of the Driver with the Insured	-	
Does Driver Own Other Vehicles?		
	No	
Vehic e Registration Number of Other Vehicle Owned by Driver		
Insura nce Company of Other Vehicle Owned by Driver		
Insula fice company of other vehicle owned by briver	- ·	
GENERAL INFORMATION OF THE ACCIDENT		
Type of Accident	Chain Collision	
Weath er Conditions	Clear	
Road Surface		
Nodu Sunace	Dry	
OTHER INFORMATION		
Was a ny foreign vehicle involved in the accident?	No	
Number of vehicles involved in the accident	3	
Was a nybody injured in the Accident?	No	
Was any injured conveyed to hospital by ambulance?	NO see	
	-	
Was any other material or property damaged?	Yes	
Number of Passengers (Including Driver)	2	
Has the driver been approached by unknown person(s)	No	
soliciting/offering accident claims assistance?	No	
PASSENGER 1		
Name	MARIE LIM	
Gender	Female	
DETAILS OF POLICE ACTION		
Was the accident reported to the police?	Yes	
Police Station Name	Tampines Neighbourhood Police Centre	
Police Station Name Police Station Phone No	Tampines Neighbourhood Police Centre (Phone) +65-18005871999	
Police Station Name Police Station Phone No Alt. Police Station Phone No	Tampines Neighbourhood Police Centre (Phone) +65-18005871999 (Fax) +65-65871699	
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Vehic le Colour	_
Vehic le Category	Taxi
Name of Driver	UNKNOWN
Contact Number	
Address	_
Address complement	- 100 100
Postc ode	_
Insurance Company Name	
Natur Of Damage	
Detail ≤ of property damaged in accident	
No. Of Passenger (Including Driver)	2

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehic e Registration Number Vehic e Manufacturer	SKX603	8X	
Vehic i e Model			
Vehic I e Variant	_		
Vehicle Colour	_		
Vehicle Category	Private of	car	
Name of Driver	QUEK T	AT HOCK	
NRIC No	SXXXX	957G	
Conta ct Number	(Phone)	+65-86869259)
Address	-		
Address complement	-		
Postcode	-		
Insurance Company Name	-		
Nature Of Damage	- 1		
Details of property damaged in accident			
No. Of Passenger (Including Driver)	-		

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder antifor the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy fiability.
- 4. The issue and acceptance of this Formby insurance companies is not an admission of policy liability on the part of the insurance companies.
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General insurance Association of Singapore (GIA) for archiving and that copies of this report w 都 for a fee be made available upon application by interested parties.
- 7. By the ladgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that :

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by mo or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' law yers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of ;
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
- (v) complying with applicable law in administering, processing, handing and/or dealing with my claims.
- (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' law yers faw firms, may/are permitted to collect. use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date Witnessed by Reporting Centre Personnel Sketch Plan

	A= SLJ8774C
ार्ग्याच्या ८	B: SHD6900Y
	C = SKX 6038X
<u>→</u>	
which receive the state of the	
TPE-	

Refer	to	ances of	Peport	No:	T/20	21030	3/20	3 2			
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Declaration

I'We declare the foregoing particulars are true in every respect,

Policyholder's Signatura / Date &

Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Beporting Centre

Personnel





Report No. T/20210303/2032

Police Station Of Origin: Tampines N.P.C

Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999

R EPORT OF A TRAFFIC ACCIDENT

O3/03/202	"n nikaj e n malika masa	ade:	Vide Report No.:		Station Diary No.: 28
Imformant	's Particul	lars			
Name of In	formant:		Address:		
ANG SOO	N HENG		APT BLK 414 TAMPINES ST	REET 41 #09	-317 SINGAPORE
			520414		
ID Type / II	D No.:		Contact No.:		
NRIC NO /	S8519470)D	Home/Office:	Mobile: 96	165287
Nationality:			Email:		
SINGAPOR	RE CITIZE	N			
Sex:	Age:	Date of Birth:	Type of Informant:	592 R.S.M	
Male	35	20/06/1985	Driver		
Race:			Language:	Institution /	School Name:
Chinese			English		
Occupation	:		Driving Licence Information:	•	
SOFTWAR	E ENGINE	ER	Class: 3	Date of Exp	piry:

General Informat	ion of the Accident					
Type of Accident:	Non-Injury Hit and Run	D	Orink Orive: Io	Date/Time of Accident: 03/03/2021 07:50)	Type of Location: Straight Road
Location:						141
PUNGGOL WAY						
Weather:		Road Sur	rface:		Road	Speed Limit:
Clear		Dry			50 Kı	m/h
Traffic Flow:		Traffic Co	ontrol:		Traffi	c Volume:
One Way		Not Contr	rolled		Mode	erate
Type of Collision: Between Moving \	/ehicles - Head To Re	ear				ne conveyed by llance:

Details of Vehicle Involved								
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger		
SHD6900Y	Car	HYUNDAI		Blue	Slightly Damaged	1		
SKX6038X	Car	MITSUBISHI	ATTRAGE	Blue	Slightly Damaged	1		
SLJ8774C	Car	VOLVO	V40	Grey	Slightly Damaged	1		

Details of Vehicle Insurance	艾斯斯基的 计二级分词 四位		
Vehicle No. Insurance Company	Insurance No	Effective	Expiry Date





2 of 4

Report No. T/20210303/2032

Police Station Of Origin:
Tampines N.P.C
Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

CONTINUATION OF REPORT

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
S LJ8774C	LIBERTY INSURANCE PTE LTD	SD20V15319	28/12/2020	27/12/2023

Details of Perso	an Involved					
Any Pedestrian I						
No. of Pedestrian	Use of Pedestrian Crossing: NA			sing: NA		
Driver						
Name	QUEK TAT HOCK			ID No.		S1689957G
Related Vehicle	e SKX6038X (Car)			Contact No.		86869259
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	
	ted Medical Leave	NIL	Degree of	The second of the second	NIL	
Driver						
Name	ANG SOON HENG			ID No.		S8519470D
Related Vehicle	SLJ8774C (Car)			Contact No.		96165287
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disch		NIL	
No. of Days granted Medical Leave NIL			Degree of	-	NIL	
Passenger						
Name	MARIE LIM			ID No.		NIL
Related Vehicle	SLJ8774C (Car)			Contact No.		98384733
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disch				
No. of Days grante		NIL	Degree of		NIL	





3 of 4

Report No. T/20210303/2032

Police Station Of Origin: Tampines N.P.C

5 Tampines Avenue 4 SINGAPORE 529682

Tel No: 1800-5871999

CONTINUATION OF REPORT

Brief Details.

on 03/03/2021 at about 0750hrs, I was driving my car Reg No: SLJ8774C Volvo grey in colour along Punggol Way towards TPE(PIE). As I was driving along the slip road entering into TPE/PIE, I saw the vehicle Reg No: SKX6038X in front of me slowed down and stop. I also slowed down my car and stopped behind the vehicle. Suddenly, I felt an impact from the rear of my vehicle. The impact causes my car to hit the vehicle in front of me. I then went out of my car and saw that my car has been hit by taxi Reg No: SHD6900Y. Hyundai Blue in colour. The taxi driver went out of his taxi however when I speak to him, he denied hitting my vehicle. I then went to speak to the other car driver and the taxi driver just went into his taxi and drive off from the accident scene.

After exchanging details with the other car driver and taking photos of the damages, I then left the scene. Both me and a Grab Hitch passenger seated at the rear passenger seat of my car were not injured during the accident. The other car driver also did not informed me of any injury to him or his passenger. The taxi that left the scene has a passenger in his taxi.

I have a in-car camera installed both front and rear of the car and it managed to record the accident. I also managed to note down the taxi Registration number before the taxi drove away. My car has slight scratches and dent both rear and front bumper. The front car has slight damages on its rear bumper.



T/20210303/2032

P olice Station Of Origin:

Tampines N.P.C

6 Tampines Avenue 4 SINGAPORE 529682

T€!No: 1800-5871999

CONTINUATION OF REPORT

4 of 4

Report No. T/20210303/2032

S⊯etch Plan

In formant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording G / Sr Staff Sgt MUHAMAD FAISA SALEH	· //	Signature Of Informant:
Signature Of Interpreter: Not applicable		Date/Time: 03/03/2021 11:42
Officer In Charge Of Case: TP / HRT / Insp GOH GEOK LYE Contact No.: 65476148	SINGAPORE POLICE FORCE	Classification Of Case:
Authentication Stamp NP168	SIGI	NATURE

REPUB LICOF SINGAPORE IDENTITY CARD NO. \$8519470D



ANG SOON HENG

顺 兴

CHINESE Date of birth 20-06-1985

SINGAPORE

Country/Place of birth

S8519470D





Date of issue 26-02-2016

APT BLK 414 TAMPINES STREET 41 #09-317 SINGAPORE 520414

REPUBLIC OF SANGARURE Birth Date: 20 Jun 1985 ue Date: 12 Dec 2007

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Motor Cars=<3000kg with =<7 passengers, exclusive 12 Dec 2007 of the driver; and other motor vehicles =< 2500kg Class 3

NP 428A



Land Transport Authority 10 Sin Ming Drive Singapore 575701

GST Registration No.: M4-0006529-2

Print Date/Time :

03 Mar 2021 / 15:06:25

Receipt Date/Time: 03 Mar 2021 / 15:06:25

Tax Invoice/Receipt

Receipt No.: ITNET-00000-210303-002577

Previous Receipt No.:

S/N Item Description/ Business Transaction Reference No.		Amount Before GST (S\$)	GST Amount (S\$)	Amount After GST (S\$)
Result of Insurance Enquiry - SHD6900Y As at 03 Mar 2021/07:50:00 Insurance Co: AXA INSURANCE PTE LTD 1 Insurance Enquiry - SHD6900Y				
Enquiry Fee 20210303150451751135		7.00	0.49	7.49
	Sub-Total	7.00	0.49	7.49
	Total Before Rounding	7.00	0.49	7.49
	Rounding Difference			0.04
	Total Amount Payable			7.45
	Paid By			
	20210303150531247	0303150531247 Direct Debit: eNETS Deb (Internet Banking		7.45
	Total			7.45
	Cash Change			0.00
	Tendered Amount			7.45
	Excess Refundable Amount			0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.



Invoice

SLJ8774C

ANG SOON HENG

Invoice No: WPLIN0005015

Invoice Date: 9/3/2021

:9/3/2021 Due Date

VHA No :5645 Referral ID : H010

Description:

Amount

Rental for

5

Day/s @ \$120

per Day \$

600.00

Vehicle No

SMF7985B

Vehicle Description

Honda Vezel 1.5 X CVT

Rental Period

03/03/2021

08/03/2021

Total Amount Payable

0

600.00

WIN WIN RENT-A-CAR PTE LTD

8 Kaki Bukit Ave 4 #06-04 Premier@Kaki Bukit Singapore 415875 Tel: 6315 8479 H/P: 9833 0807 VHA No: 5645

Invoice No: WPLIN 5015

Hirer's Vehicle No:

VEHICLE RENTAL AGREEMENT

HIR R'S PARTICULARS	Vehicle No: SMF798 / BReplace Veh No: 017893//				
Nan e: (as in I/C) Ang soon Heng	Mileage Out: 83238 Mileage Out:				
NRIC/FIN No: \$8519470D	Make & Model: Auto / Manual				
Address (Res): Blk 414 Tampinos St 41	HONDA VELEL				
#09-317 5 (520414)	Out : Date 3 3/21 Time: 1340				
Nam € &Address of Employer:	HIRE / PERIOD EXPIRY Time:				
Occupation: Driving Exp:	NON-WAIVER EXCESS=\$ 2009				
Occupation:Driving Exp:	CHARGES				
Issue Date: 12/12/2007 Date of Birth: 20/06/1985	Daily 5 @\$ 120 per day # 600 -				
Tel: (O) (R) HP: 96165287	Weekly @\$ per week				
ADD TIONAL DRIVER'S PARTICULARS	Monthly @\$ per month				
Name: (as in I/C)					
NRIC / FIN No:	Hours @\$ per hour				
Address (Res):	Extension @\$				
	Delivery/Collection Service				
Occupation: Driving Exp:	SUB-TOTAL \$				
Singapore Driving Licence No:					
Issue Date: Date of Birth:	PETROL LEVEL				
Tel: (O)(R):H/P:	Out E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F				
VEHICLE CHECK LIST	In E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F				
<u>ω</u>	Fuel State of the				
SCRATCHES SCRATCHES SCRATCHES	Traffic / Parking Fines				
SCHATTS SCHATTS					
	TOTAL CHARGES \$				
ACCIDENTS ACCIDENTS	o znesjeg om tit di hin mainev viet sitt alle to "federati" til sammes. His minagy blas set east of zamenal no znesten havrolitakni stektor.				
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A COLIE					
☐ · Z < RIGHT FRONT TOP LEFT	Hirer's Signature				
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MISSING / FAULTY ACCESSORIES / PARTS	respective and and an experience as the mission and				
REMARKS:	and an analysis of the state of				
	Additional Driver's Signature				
have read and agree to the terms and condition on both sides of the agre	eement. If I have presented a charge/credit card for payment. I agree that				

I have read and agree to the terms and condition on both sides of the agreement. If I have presented a charge/credit card for payment. I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have given WIN WIN RENT-A-CAR PTE LTD in connection with this agreement is true.

*IMPORTANT

UEN: 201505115E

- 1. VEHICLE IS STRICTLY PROHIBITED FOR "HIRE FOR REWARDS" USAGE SUCH AS UBER / GRABCAR / GRABSHARE ETC.
- 2. ONLY PERSON ABOVE 23 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE THE VEHICLE.
- 3. ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS REDIRECTED.
- 4. THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN AT THE RATE SHOWN PER HOUR OR PER DAY, INCLUSIVE OF CDW AND/OR PAI WHERE APPLICABLE.
- 5. IN CASE OF ACCIDENT. THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES. A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
- 6. VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY. AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY WIN WIN RENT-A-CAR PTE LTD.

RETURN OF VEHICLE. THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SIGNATURE OF HIRER / DRIVER" FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO WIN WIN RENT-A-CAR PTE LTD AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	A STATE OF THE STA
8 3 702	1 5.25	pmzzyt	2	A Company of the Comp	SIGNATURE OF HIRER/DRIVER