

T K LEE AUTOMOTIVE PTE.LTD.

NO. 1 KAKI BUKIT AVE 6 #02-47 AUTOBAY
SINGAPORE 417883 Co.Reg. No. : 201210266Z
TEL: 6509 5521 / 6509 5524 FAX: 6509 5523

Attn: The Motor Claims Department
HSBC INSURANCE SINGAPORE PTE LTD
10 MARINA BOULEVARD
#48-01 MARINA BAY FINANCIAL CENTRE
SINGAPORE 018983

Yrs Ref.: SHD6828Z
Our Ref.: TKL0623-3374
Date.: 09.06.2023

Accident involving SNF822Y And SHD6828Z On 09.05.2023 At 2335 HRS Along
UPPER CHANGI ROAD CARPARK

We refer to the above matter. We are instructed that above accident was caused solely and completely by the negligence of your insured, as a result of which, our client have suffered loss and expenses.

We are instructed by our client to make a property damages claims as:-

	<u>Amount</u>
1. Cost of Repair	S\$ 1,800.00
2. Loss of Rental (3 days @ S\$150 Per Day)	S\$ 450.00
3. Towing	S\$ -
4. LTA Search Fee	S\$ 26.75
5. E-File Search Fee	S\$ -
Claim Amount	<u>S\$ 2,276.75</u>

Enclosed are the following documents for your perusal.

<input checked="" type="checkbox"/> Original Final repair Bill	<input checked="" type="checkbox"/> Letter of Authority
<input type="checkbox"/> Original Survey Report & Inv	<input checked="" type="checkbox"/> Rental Agreement / Receipt / Towing
<input type="checkbox"/> Original Photographs of [SNF822Y]	<input checked="" type="checkbox"/> E-File Search Fee/ LTA Receipt
<input checked="" type="checkbox"/> GIAS Reports of [SNF822Y]	<input checked="" type="checkbox"/> Vehicle Registration Card
<input checked="" type="checkbox"/> Certificate of Insurance	<input type="checkbox"/> Driver's Driving License / Identity Card
<input checked="" type="checkbox"/> Report Of A Traffic Accident	

Your prompt action will be greatly appreciated.

Kindly acknowledge receipt of the above said documents and your favourable reply is greatly appreciated.

Yours faithfully,
T K Lee Automotive Pte. Ltd.



tklee0247@gmail.com

T K LEE AUTOMOTIVE PTE LTD

1 Kaki Bukit Avenue 6, #02-47 Autobay, Singapore 417883

Tel : (65) 6509 5521 Fax : (65) 6509 5523

Co. Reg. : 201200623R

INVOICE

1158

Messrs : **HSBC INSURANCE SINGAPORE PTE LTD**

10 MARINA BOULEVARD

#48-01 MARINA BAY FINANCIAL CENTRE

SINGAPORE 018983

Claim No. : TKL0623-3374

Acc. Date : 09.05.2023

Veh. No./Model : SNF822Y VOLVO S60

Date : 09.06.2023

QTY	DESCRIPTIONS	AMOUNT
	<p>Repair Cost : Inclusive of supply parts, panel beating, spray painting and labour.</p>	1,800.00
		\$ 1,800.00

E. & O.E.

- * Please make all payments to " T K Lee Automotive Pte Ltd "
- * All service and repairing are in good order & conditions.



T K Lee Automotive Pte Ltd

SINGAPORE ACCIDENT STATEMENT

IMPORTANT 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 Actual 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 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	10/05/2023 17:04 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	09/05/2023 23:35 (SGT)
Exact Location of Accident	Upper Changi Rd, Singapore
Additional Location Information	CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNF822Y
-----------------------------	---------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ALEX LIM CHEE KIANG
NRIC No	S7925030I
Email Address	ALEXCKLIM79@GMAIL.COM
Mobile Phone No	(Phone) +65-98888333
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Volvo
Model	S60
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	2000

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5131717751

DRIVER

Name of Driver	ALEX LIM CHEE KIANG
NRIC No	S7925030I
Date Of Birth	22/08/1979
Occupation	Indoor

Date Of Driving Pass	11/06/2003
Driving experience	19 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98888333
Alt. Phone Number	-
Email Address	ALEXCKLIM79@GMAIL.COM
Address	65 NEW UPPER CHANGI ROAD #13-1142
Address complement	-
Postcode	460065
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Hit and run / Vandalism / Damaged whilst parked
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20230510/7031

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD6828Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
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 Form must be completed by the Policyholder and/or the Actual 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 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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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.

8 Consent under the Personal Data Protection Act (PDPA)

I understand, 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 me 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' lawyers/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 the claims;
 - (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, handling 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' lawyers/law 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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



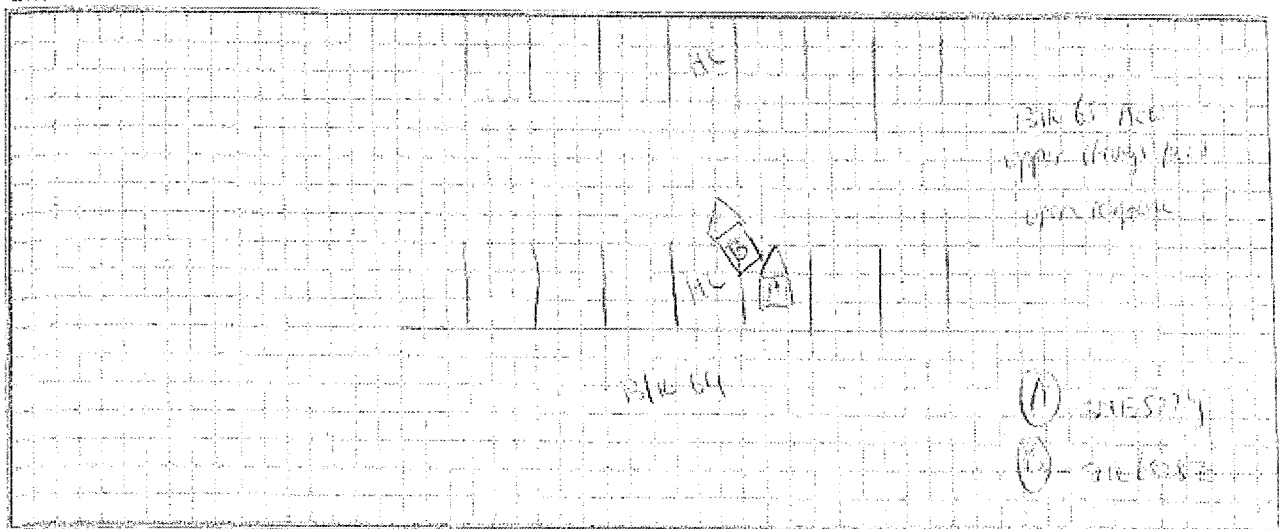
Policyholder's Signature / Date & Time



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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan



vJun2022

Describe Circumstance of the Accident	Date
<p>ref to police report</p>	

Declaration

I/We declare the foregoing particulars are true in every respect.

Palmer

Quincy

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5131717751

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : **SNF822Y**
Chassis Number : YV1FS40LDH2431409
2. Name of Policyholder : ALEX LIM CHEE KIANG
3. Effective Date of Insurance : 29 Dec 2022
4. Expiry Date of Insurance : 28 Dec 2023
5. Persons or Classes of Persons entitled to drive#
(a) The Policyholder.
(b) Any other person who is driving on the Policyholder's order or with his/her permission.
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: YES (FREE)
ROADSIDE ASSISTANCE AND WELLNESS COVER	: YES
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: ALEX LIM CHEE KIANG
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: MAYBANK SINGAPORE LIMITED
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : KINETIC INSURANCE AGENCY (00000573090)

Date of Issue : 22 Nov 2022 12:15 hrs

For **INCOME INSURANCE LIMITED**



Chief Executive



SINGAPORE POLICE FORCE



T/20230510/7031

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20230510/7031

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/05/2023 13:30		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: ALEX LIM CHEE KIANG			Address: 65 NEW UPPER CHANGI ROAD #13-1142 SINGAPORE 460065		
ID Type / ID No.: NRIC NO / S7925030I			Contact No.: Home/Office: Mobile: 98888333		
Nationality: SINGAPORE CITIZEN			Email: ALEXCKLIM79@GMAIL.COM		
Sex: Male	Age: 43	Date of Birth: 22/08/1979	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		
Occupation: Office supervisor			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 09/05/2023 23:35	Type of Location: Car Park
Location: NEW UPPER CHANGI ROAD				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Two Way		Traffic Control:		Traffic Volume:
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD6828Z	Car					0
SNF822Y	Car					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20230510/7031

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20230510/7031

CONTINUATION OF REPORT

Vehicle Owner				
Name	ALEX LIM CHEE KIANG		ID No.	S7925030I
Related Vehicle	SNF822Y (Car)		Contact No.	98888333
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL	

Brief Details.

On 09/05/2022 at about 2000hrs. I parked my vehicle at home and everything was intact nothing was amiss.

On 10/05/2022 at about 1015hrs, I went to my vehicle and start up my vehicle. My in car camera prompted me that there is an imptac on my vehicle. I then took my camera for viewing and notice that on 09/05/2022 at about 2335hrs there was a taxi vehicle number bearing SHD6828Z reverse into the lot beside me and hit onto my vehicle subsequently and left. There is no note on my vehicle.

I then contacted taxi company and was informed that to lodge an insurance report. I'm lodging this report for insurance purpose and police action.



**SINGAPORE
POLICE FORCE**



T/20230510/7031

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20230510/7031

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
RASHIDAH BINTE AZMAN
Contact No.: 65476902

This report is lodged at Eunos NPP Kiosk
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
10/05/2023 13:30

Classification Of Case:

Authorisation Third Party Claim Demand

Date:

To: HSBC Insurance Singapore Pte Ltd

RE: ACCIDENT INVOLVING VEHICLE No.: SNF822Y and SHD6828Z

AT / ALONG Upper Changi Road Carpark

ON 09/05/2023

I/We, Alex Lim Chee Kiang of (NRIC No. / ROC No.)

S7925030I of 65 New Upper Changi Road #13-1142 (S)460065

owner of vehicle no. SNF822Y in consideration of M/S
T K Lee Automotive Pte Ltd repairing my/our vehicle SNF822Y at
my/our instruction and hereby authorise M/S T K Lee Automotive Pte Ltd to
demand claim settle receive whatever amount settled / payable by the insurance company and / or
third party or to commence legal proceedings, if necessary, under my name, for the cost of repairs,
car rental and / or less of use, etc. and to their appointing solicitor to act for me / us in respect of
the said accident / claim and all claimed and / or settled shall belong to them absolutely.

I further agree and undertake to indemnify them against the above mentioned claim costs which
may arisen therewith.

Signature of Owner: 

Date:

CARZ RENTAL PTE. LTD.

1 Kaki Bukit Avenue 6, #02-47 Autobay,
Singapore 417883
Tel: (65) 6509 5521 Fax: (65) 6509 5523


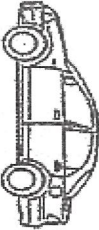
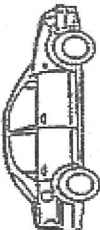

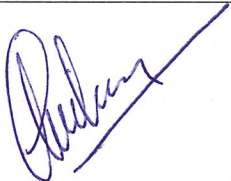


TK Lee

SNF822Y

VEHICLE RENTAL AGREEMENT

ROC NO: 201312119K

RA NO: 4246

Hirer Particulars -		Veh. No. <u>SJV5398K</u>		Replace veh. No.		
Name	<u>Alex Lim chee Kiang</u>	Make / Model <u>Toyota camry</u>		Auto/Manual <u>Auto</u>		
Address	<u>65 New Upper changi Road</u>	Date/Time Out	<u>05/06/2023 1211</u>	KM Out		
	<u>#13-1142 (S) 460065</u>	Date/Time In	<u>08/06/2023 1200</u>	KM In		
NRIC/Passport	<u>S7925030I</u>	Mobile	<u>98888333</u>	Estimated Date/Time Return		
Tel (O)		Fax		Rental charges -		
				S\$	S\$	
Authorised Driver's Particulars -						
Name		Hours	@	Per Hour		
Address		Days	@	Per day	<u>450</u>	
		Weeks	@	Per Week		
		Months	@	Per Month		
NRIC/Passport	<u>S7925030I</u>	Nationality		Sub-Total		
Date of Birth	<u>22/08/1979</u>	Occupation		Less Discount		
D/Licence No.	<u>S7925030I</u>	Mobile		Sub-Total		
Pass Expiry Date	<u>11/06/2003</u>	Tel (O)		Optional Charges -		
Country of Issue		Tel (H)		Delivery	@	
(A) - ACCIDENTS (D) - DENTS (S) - SCRATCHES		Collection	@	Per Trip		
<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>FRONT</p>  </div> <div style="text-align: center;"> <p>LEFT</p>  </div> <div style="text-align: center;"> <p>RIGHT</p>  </div> <div style="text-align: center;"> <p>REAR</p>  </div> </div>		Others				
		Sub-Total				
		Add 7% GST				
		(A) Estimated Total Rental				
		Extension -				
Extension Rental		X				
Surcharge (Malaysia)		X				
P.A.I.		X				
		X				
Others -						
Misc :						
Cash/Nets/Cheque/VISA/MC Card No:						
Sub-Total				<u>\$450/=</u>		
Add 7% GST						
(B) Extension/others Total						
(A) + (B) Grand Total Rental Charges						
Less Prepayment						
Balance Due						
Physical Damage Excess		Hirer's Acknowledgement		Remarks:		
Singapore	S\$			Received by		
Malaysia	S\$			Deposit		
Young, Elderly & Inexperience driver	S\$			Amount		
(Additional)				The hirer hereby read and understood all terms and conditions stated on this page and overleaf :		
IMPORTANT NOTE: 1. Only persons aged 24 and above or below 65 with 2 years or more driving experience, authorized, licensed and signing this agreement may drive the vehicle. 2. In case of accident, the Hirer shall report to rental office immediately. If there is any bodily injury, a police report must be made within 24 hours. 3. Vehicle is strictly for SINGAPORE USE ONLY, and may not be driven out of Singapore without prior consent of Carz Rental Pte. Ltd. 4. Unauthorised drivers, drivers who did not fulfill the above requirement are liable for the full cost & other losses suffered by Carz Rental Pte. Ltd. should the vehicle is damaged or stolen.		 Hirer Signature/Co's Stamp/Date		 Authorised Signature/Date		

> Back to OneMotoring



Land Transport Authority
10 Sin Ming Drive
Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 05 Jun 2023 / 09:30:53

Receipt Date/Time : 05 Jun 2023 / 09:30:53

Tax Invoice/Receipt

Receipt No. : ITNET-00000-230605-000475

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 - SHD6828Z As at 09 May 2023/23:35:00 Insurance Co: HSBC LIFE (SINGAPORE) PTE. LTD.				
1	Insurance Enquiry - SHD6828Z Enquiry Fee 20230605092932135306	24.77	1.98	26.75
Sub-Total		24.77	1.98	26.75
Total Before Rounding		24.77	1.98	26.75
Rounding Difference				0.00
Total Amount Payable				26.75
Paid By				
	20230605093018179	Direct Debit: eNETS Debit (Internet Banking)		26.75
Total				26.75
Cash Change				0.00
Tendered Amount				26.75
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.

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Singapore NRIC
Owner ID: 808I

Vehicle Details

Vehicle No.: SKE2808S
Vehicle to be Exported: No
Intended Deregistration Date: 05 Jun 2023
Vehicle Make: AUDI
Vehicle Model: A5 SPORTBACK 1.8 TFSI MU
Primary Colour: White
Manufacturing Year: 2011
Engine No.: CDH155562
Chassis No.: WAUZZZ8T9BA111611
Maximum Power Output: 118.0 kW (158 bhp)
Open Market Value: \$43,905.00
Original Registration Date: 07 Dec 2011
First Registration Date: 07 Dec 2011
Transfer Count: 1
Actual ARF Paid: \$43,905.00

Intended PARF Rebate Details

PARF Eligibility: Forfeited
PARF Eligibility Expiry Date: -
PARF Rebate Amount: \$0.00

Intended COE Rebate Details

COE Expiry Date: 31 Oct 2031
COE Category: B - Car (1601cc & above)
COE Period(Years): 10
PQP Paid: \$60,586.00
COE Rebate Amount: \$50,911.00
Total Rebate Amount: \$50,911.00

The information contained herein is correct as at 05 Jun 2023

OK