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PERIOD : 11 (NOVEMBRE) - 2025

No	Dt	Policy	Subscriber	Member	No Benef	Beneficiary	Form no	Cost	Copay	Insurer share
1	03	RAD000196	KIGALI MARRIOTT HOTEL & F	UMUTONI VEDASTE	0087058904	Alphonsine Uwingabire	763590	10 110	1 011	9 099
2	10	19000002	MTN RWANDACELL PLC	ISHIMWE PASCAL	0278004402	UMURERWA LATIFA	774523	11 748	0	11 748
3	10	20000035	SALVO GRIMA RWANDA LTD	NDAGIJIMANA SUN Rene	0348009502	MUREKATETE Claire	774525	460	46	414
4	14	23000013	HITIMANA Jean Claude	HITIMANA Jean Claude	0831000107	ASIFIWE ZYANA Tania	737822	1 167	117	1 050
5	23	19000002	MTN RWANDACELL PLC	ISHIMWE PASCAL	0278004402	UMURERWA LATIFA	772820	43 371	0	43 371
6	24	24000811	NIYOMUGENGA GRACE	NIYOMUGENGA GRACE	3272000102	NIYIGENA ADAM	776813	11 347	1 135	10 212
7	25	RAD000196	KIGALI MARRIOTT HOTEL & F	NZARAMBA Jean Claude	0087057602	Agwize Isaro Fleya	619467	19 624	1 962	17 662
8	26	RAD000196	KIGALI MARRIOTT HOTEL & F	ALEXIS DUSENGIMANA	0087073001	ALEXIS DUSENGIMANA	619468	5 865	586	5 279
9	28	RAD000038	SKOL BREWERY LTD	NIZEYIMANA JOSEPH	0065062401	NIZEYIMANA JOSEPH	748474	25 146	2 515	22 631
10	28	22000007	POLYCLINIQUE SAINT JEAN	SERUGENDO Sylvestre	0710002401	SERUGENDO Sylvestre	748473	53 346	8 002	45 344
11	28	19000002	MTN RWANDACELL PLC	ISHIMWE PASCAL	0278004402	UMURERWA LATIFA	787501	109 164	0	109 164
TOTAUX :								291 348	15 374	275 974

We say the amount of this request for payment only :

Two hundred seventy-five thousand nine hundred seventy-four FRW

Done in Kigali, on 22/12/2025

For : IHIRWE PHARMACY