

LOGO

Oceanic Marine Insurance Ltd.  
123 Marine House, Port Avenue  
Maritime City, Country 56789  
Phone: (012) 345-6789  
Email: contact@oceanicmarine.com

## Marine Insurance Premium Payment Receipt

**Receipt No.:** R-2024-0142

**Date of Issue:** 2024-06-15

**Policy No.:** MIP-7896543

**Period of Insurance:** 2024-06-20 to 2025-06-19

### Insured Details

**Name:** BlueWave Export Pvt. Ltd.

**Address:** 27 Harbor Street, Coastal Town, Country

**Consignment Details:** 3x40' Containers, General Merchandise

**Voyage:** Origin Port A to Destination Port B

### Payment Details

**Payment Method:** Bank Transfer

**Date Paid:** 2024-06-15

**Currency:** USD

**Amount Received:** \$1,850.00

**Received From:** BlueWave Export Pvt. Ltd.

### Authorized Signature

Oceanic Marine Insurance Ltd.  
(Authorized Representative)

### Important Notes

- This receipt serves as proof of premium payment for the corresponding policy.
- This document is not a certificate of insurance or a policy itself.
- Insurance coverage is subject to the terms and conditions stated in the marine policy.
- Ensure policy details and insured particulars are correct. Report discrepancies immediately.
- Keep this receipt for your records and possible future claims reference.