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THE UNITED REPUBLIC OF TANZANIA
MINISTRY OF LABOUR AND EMPLOYMENT
(Labour Administration and Inspection Services Department)



Tel.No.2646278.
Labour Office,

P.O.Box 3,
TANGA.
25th March 2013

Ref. No. TAN/WC/48/2011.

The Manager,
MAMUJEE PRODUCTS LTD
P.O.Box 394,
TANGA.

WORKER'S COMPENSATION
RE: EDNA HAMISI DANGA

I have the honour to refer to your report of accident to the above mentioned workman arising out of and in the course of his employment with you on 28/05/2010.

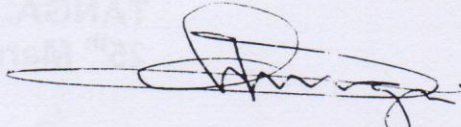
2. Compensation has been assessed in accordance with the provisions of the Worker's Compensation Act Cap.263, R.E 2002 as follows:

(i)Temporary Incapacity Total at 100% for 30 days	Shs	40,040
(ii)Temporary Incapacity Partial at 50% for 150 days	Shs	101,100
(iii)Permanent Incapacity Partial/Total at 75%	Shs	108,000 ✓
TOTAL	Shs	248,140

3. From the total sum shown in paragraphs (i) and (ii) herein above i.e. Shs **141,140/-** you may deduct any money paid to the workman in respect of Hospital or otherwise off duty. Hospital fees which are the responsibility of the employer however are

not deductible. The Compensation due in respect of Permanent Incapacity may not be disturbed under any circumstances, hence should be paid in full.

4. You are hereby required to bring the above shown sum to this office together with the injured person within thirty days from the date of receiving this letter and pay the Compensation to the above named injured person in my presence. At the same time arrange for the enclosed forms of Agreement to be completed signed and witnessed as indicated and return them to me before the date of payment.



DAUD M. CHUNGA
For: REGIONAL LAEOUR OFFICER

TANGA
KINSHASA WAKAZI (M)
S.L.P 3
TANGA