



DENTISTREE DENTAL CLINIC

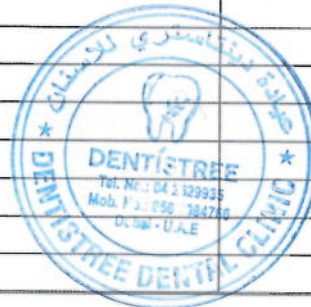
TAX INVOICE

Reg TRN No : 100529934000003
Facility Name : DentisTree Dental Clinic
Address : Ground floor, Shop 3, Wasl Port Views 8, Al
Mina Road, Jumeirah 1, Dubai
042529935 // 045641764

Policy No : Invoice No : INV-1C006082
Claim No : Invoice Date : 09-03-2024
Doctor : Rutul Desai Invoice Time : 09-03-2024
Customer Name : Suhaan Sharma Invoice Type : Outpatient
Age / Gender : 124Y - 2M - 8D / Male Mode : Cash / Credit
Department : Referred By :
Rate Plan : Visit ID :
Insurance Company : Cash Registered Date : 09-03-2024
MR # : 3330

Customer VAT Reg No :

Sl No	Service Code	Treatment / Procedure	Unit Price	Qty	Gross	Discount	VAT %	VAT Amount	Net
1	D1120	prophylaxis - child	500.00	1	500.00	0.00	0	0.0000	500.00
Gross Amount (in AED)									500.00
Discount (in AED)									0.00 Fixed
Net Amount (in AED)									500.00
Net Sponsored Amount (in AED)									500.00
Tax on Net Sponsored Amount(in AED)									0.00
Total Sponsored Amount(in AED)									500.00
Net Patient Amount (in AED)									500.00
Tax on Patient Amount(in AED)									0.00
Total Patient Amount(in AED)									500.00
Taxable Sale @ 5%(in AED)									0.00
Tax on 5%(in AED)									0.00
Taxable Sale @ 0%(in AED)									500.00
Paid (in AED) (Cash)									-500.00
Balance (in AED)									0.00
Advance Balance (in AED)									0.00



Prepared By Gayle Reyes

Patient Signature

Kindly note that this automated and uniquely dated invoice is payable on this visit before leaving the Center deposit will be automatically deducted upon settlement.