

TAX INVOICE

Reg TRN No

100529934000003

Facility Name

:

DentisTree Dental Clinic

Address

P.O.Box 23581, Ground floor, Shop 3, Wasl Port Views 8, Al Mina Road, Jumeirah 1, Dubai

042529935 / 045641764

Invoice No

INV-1C009017

Invoice Date

: 11-12-2024

Doctor

1144-100201

Department

: Dental

Patient Name

Rutul Desai Khushboo Vora

MRN#

: 3281

Age / Gender

34Y - 1M - 15D / Female

Type

: Cash

Visit Date

11-12-2024

Inv. Time

: 15:18:36

| SI No | Service Code | Treatment / Procedure | Tooth No | Unit Price | Qty | Gross | Discount | VAT % | VAT Amount | Net |
|-----------------------------|-----------------|--|-------------|---------------|-----|----------|----------|----------|---------------|----------|
| 1 | D3310 | endodontic therapy, anterior tooth (excluding final restoration) | | 1,000.00 | 1 | 1,000.00 | 0.00 | 0 | 0.0000 | 1,000.00 |
| Gross Amount (in AED) | | | | | | | | | 1,000.00 | |
| Discount (in AED) | | | | | | | | 0.00 | | |
| Net Amount (in AED) | | | | | | | | 1,000.00 | | |
| Tax on 5%(in AED) | | | | | | | 0.00 | | | |
| Total Amount(in AED) | | | | | | | | 1000.00 | | |
| Paid (in AED) (Credit Card) | | | | | | | | 1,000.00 | | |
| Balance (in AED) | | | | | | | | 0.00 | | |
| Advance Balance (in AED) | | | | | | | | | 0.00 | |

Prepared By Gayle

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.