



DENTISTREE DENTAL CLINIC

350.00

RECEIPT VOUCHER (No.REC-1006193)

Date:01-03-2024

Receive from Mr./Mrs./M/s. 3323 - Maria Ines Pereira

The sum of Dhs. **Three Hundred Fifty Dirhams and Zero Fils Only**

By Cash **0.00** / By Credit Card **350.00** / By Cheque **0.00** / By Bank Transfer **0.00** / By Allocated **0.00**

Bank: Cheque No.

Date: **01-03-2024**

Being

Made by **Gayle Reyes**

