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**patient national id: 100020887151860008**

**patient name: ABDELMADJID KAHOUL**

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**transaction ID:**

Payment type: On Ligne

Full payment made on: 2023-06-09 22:13:26.961930

**appointment ID: 299**

appointment date: 2023-06-12

appointment time: 08:00

**table tarif**

Code	Description	Amount excl. VAT
BBT	Blood Typing	10.00 \$
BHBSA	HBS (Hepatitis B Surface Antigen)	15.00 \$
<b>Total amount</b>		<b>25.00</b>

**Standard notes**

Please note this is the only copie you can get if there is any mistake about this document contact us

