



Dr M. Masunda

Dental Surgeon BDS(UZ) Cert: Implantology (UP-SA)

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NAME CHRISTABEL CHINYANGANYA
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MED NAME CELLMED PREMIUM
MED No 2015429376 -00

QOUTATION FOR A 3 UNIT BRIDGE

| TARRIF | DESCRIPTION | AMOUNT (USD) \$ |
|-----------|---------------------|-------------------|
| 98523 X 2 | Zirconia crowns | \$900.00 |
| 98518 | Pontics | \$200.00 |
| 98599 | Lab fee | \$600. 00 |
| | TOTAL AMOUNT | \$1 700.00 |

BANKING DETAILS

NOSTRO

MASIMBA MASUNDA

8740103315400

STANDARD CHARTERED

PRIORITY BANKING

