

Medico-Legal Query Form

General Details

Title: Dr

First Name: Kondwani

Last Name: Tshuma

BHF Practice No: 555555

Medical Practice Type: Radiologist

Telephone: 0614837013

Email: md.2022.b7j6z5@vossie.net

Query Information

Query Type: Fraud

Fee: R 2500.00

Required Service: Defense Resonse

Case Description: dsfsdfdsf

Appointment Details

Date: 2024-11-09

Time Slot: 07:08:00

Meeting Type: Physical