

☐ **Beka Dental Clinic**



☐ Betel Post Office,
Kolfe, Addis Ababa
Phone +251 91 116 8904



Date:

Invoice ID:

INVOICE



BILLED TO:

Name:

Phone:

#	DESCRIPTION	PRICE(ETB)	QTY.	TOTAL(ETB)
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Subtotal

Tax Rate



TOTAL

Doctor's Signature