

INSIGHT EYE CARE

No.418/1, Korathota North, Kaduwela
Tel: 011 2 159 425, Mail: insighteyec@gmail.com

04:13 PM - 12/06/2022

Invoice No: inv/rc/8

Patient Details

Name	rr
Age	444
Apoinment Number	09

Payment

Channeling Price Rs.	500.00
Additional Price Rs.	0.00
Total Rs.	500.00

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Authorization Signature

Code Lab Information Systems | 078 458 0996