

FICHE CLEINT

| ASSURANCE | | | | | | | | DATE | |
|----------------|--|--------|--|---------|---------|------------|---------------|---------|--|
| NOM & PRENOMS | | | | | CONTACT | | | | |
| TYPE DE VERRES | | | | | | TRAITEMENT | | | |
| OD SPH | | OD CYL | | OD AXE | | QTE | | MONTANT | |
| OG SPH | | OG CYL | | OG AXE | | QTE | | MONTANT | |
| MONTURE | | | | | | | MONTANT | | |
| MONTANT TOTAL | | F | | REMISE | | | NET A PAYER | | |
| PART ASSURANCE | | | | ACOMPTE | | | RESTE A PAYER | | |

San Pedro Cité Nitro à cçoté de la PJ 01 BP 198 San Pedro 01 Tel: 47 96 05 56 / 02 60 05 69



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| MONTANT TOTAL | | R | | REMISE | | | NET A PAYER | | |
| PART ASSURANCE | | ACOMPTE | | | | RES | TE A PAYER | | |