Payment Receipt

Patient: Optional Vitals Test Patient (PAT-2025-18)

Billing Total: 130 ETB

Amount Paid: 130 ETB

Payment Type: CASH

Remaining Balance: 0 ETB

Services:

• Fluoride Treatment (1x): 35 ETB

• Dental Sealants (1x): 80 ETB

• Blood Pressure Check (1x): 15 ETB