

# Payment Receipt

Lifeline Clinics

Transaction ID

**702dcf35-7a6d-4fbe-a133-27b1b1ff0  
688**



Payment Status

**SUBMITTED**

Payment Pending

Date & Time

**Oct 30, 2025, 12:00 PM**

## Payment Method Details

**Payment Method:** AIRTEL\_RWA

**Payer Phone:** 250735987654

**Currency:** RWF

**Country:** RWA

**Payment Initiated:** Oct 22, 2025, 08:38 AM

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## Contact Information

**Phone Number:** 250735987654

**Email:** okwolig12@gmail.com

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## Amount Details

Original Amount: **150 RWF**

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**Final Amount:** **150 RWF**

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## Delivery Information

**Delivery Method:** In-Person

## Appointment Details

**Service:** blood glucose

**Scheduled Date & Time:** Thursday, October 30, 2025 at 12:00 PM

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Thank you for choosing Lifeline Clinics

This is an automated receipt. Please keep it for your records.