



## QUOTATION (Treatments / Procedures)

Reg TRN No : 100594463000003  
Facility Name : Oxygen Medical Center L.L.CÂ (Ajman)  
Address : Al Rumailah - Al Rumailah 3 - Ajman  
: 067406022/97167406088

Doctor : Dr Amira(DHA # -MOHD60150) Department : Dental  
Patient Name : Mrs. Lemia Baker Hussein Zain - MRN/File No. : 18085  
Age / Gender : 51Y - 2M - 4D/Female Type : Insurance  
Visit Date : 03-Mar-2024 10:00 - 11:00 Made By : Dr Amira

#	Treatment/Procedure	Qty	Unit Price	Gross	Discount	NET	VAT	NET + VAT
01	<b>D1110</b> Prophylaxis - Adult	1.00	145.24	145.24	0.00	116.19	0.00	116.19
02	<b>D2392</b> Resin-Based Composite - Two Surfaces, Posterior	1.00	148.20	148.20	0.00	118.56	0.00	118.56
		2.00	293.44	293.44	0.00	234.75	0.00	234.75

Kindly note that this automated and uniquely dated invoice is payable on this visit before leaving the Center deposit will be automatically deducted upon settlement.

**Patient Signature**