

**ADVANCED AMERICAN DENTAL CENTER**  
 PO BOX 41269  
 ABU DHABI, UE 02  
 (02)681-2921

**STATEMENT OF SERVICES RENDERED**

Sunday  
 March 16, 2014

**ACCOUNT NAME AND ADDRESS**

Cassie Hambleton  
  
 ABU DHABI, UE 02

**ACCOUNT NUMBER**

2695500

PATIENT	CODE	DESCRIPTION	TH.	SURF.	AMOUNT	EST. INS
Cassie	1110	Adult Prophylaxis			650.00	
Cassie	1204	Fluoride (not incl. Prophylaxis) -Adult			50.00	
Cassie	11	Mastercard Automatic Credit Card Payment			700.00CR	

**ADVANCED AMERICAN DE**

AL KHALIDIYA, BEHIND BMW SHOWROOM  
 ABU DHABI - UAE

BATCH: 569      RECEIPT NO : 010470  
 DATE : 16/03/14      TIME : 18:30:02

POS ID: 00016882  
 MID: 723654000

PURCHASE  
 VISA (C)      EXP \*\*\*\*\*  
 \*\*\*\*\* 7765

HAMBLETON/DAVID D

AMOUNT      AED 700.00

PLEASE DEBIT MY ACCOUNT

APPROVAL CODE 092942

THANK YOU VISIT AGAIN  
 NATIONAL BANK OF ABU DHABI  
 < CUSTOMER COPY >

**PAID**

المركز المتقدم الامريكى للأسنان  
 Advanced American Dental Center  
 HAAD Licence No. M 21  
 Tel.: 6812921 P.O. 41269, Abu Dhabi

PREVIOUS ACCOUNT BALANCE	TODAY'S CHARGES	TODAY'S PAYMENTS	NEW ACCOUNT BALANCE	PLEASE PAY THIS AMOUNT
0.00	700.00	700.00	0.00	0.00

Next Appt.	Day	Date	Time	Reason (** = Estimate)