

BUKTI PEMBAYARAN

(PAYMENT RECEIPT)

Kuitansi No. (Receipt No.):

INV-20251105-1762315451328-765

Tgl. Pembayaran (Payment Date):

05 November 2025

Diterima Dari:

Received From:

Nama (Name) : DARMIYATI

Alamat (Address) : Jl. H. Saaba Terusan
no.147 RT06/RW06, Kel.
Joglo, Kec. Kembangan .
Jakarta Barat

Telepon (Phone) : 6289664018575

Email : syamsialfalaq99@gmail.co
m

Detail Pembayaran (Payment Details):

No	Deskripsi (Description)	Jumlah (Amount)
1	CardioHealth Complete	Rp300.000
Total Pembayaran (Total Payment)		Rp300.000

Metode Pembayaran:

Payment Method:

Bank Transfer

Nomor Akun (Account Number):

Nama Akun (Account Name):

Tanggal Transfer (Transfer Date):

05 November 2025

Waktu (Time):

11:04 (WIB)

Catatan:

Pembayaran telah diterima penuh dan tidak dapat
dikembalikan. Harap simpan struk ini untuk arsip Anda.

Notes:

Payment has been received in full and is non-refundable.
Please keep this receipt for your records.

Diterima Oleh:

Received By:

Sheren Delfina
Finance Staff