

BUKTI PEMBAYARAN (PAYMENT RECEIPT)

Kuitansi No. (Receipt No.):

INV-20260413-1776049117165-246

Tgl. Pembayaran (Payment Date):

13 April 2026

Diterima Dari:

Received From:

Nama (Name) : AKBAR RADITYA
RAHARDJO

Alamat (Address) : JL CILILIN II NO 17,
KEBAYORAN BARU,
PETOGOGAN, JAKARTA
SELATAN

Telepon (Phone) : 628170303

Email :

Detail Pembayaran (Payment Details):

No	Deskripsi (Description)	Jumlah (Amount)
1	MCU CARDIO RISK	Rp325.000
Total Pembayaran (Total Payment)		Rp325.000

Metode Pembayaran:

Payment Method:

Bank Transfer

Nomor Akun (Account Number):

Nama Akun (Account Name):

Tanggal Transfer (Transfer Date):

13 April 2026

Waktu (Time):

09:58 (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