



## PAYMENT DETAILS

INSTITUTION	PHARMACY COUNCIL
CONTROL NUMBER	991620220794
BANK RECEIPT	EC101973922877
GEPG RECEIPT	923282207097115
PAYER NAME	PRESTON PHARMACY
AMOUNT	TZS 500,000.00
AMOUNTINWORDS	FIVE HUNDRED THOUSAND
PAIDTHROUGH	NMB
PAYMENT DATE	Oct 9, 2023
PAYMENT RECEIVED DATE	Oct 9, 2023
IN RESPECT OF	ANNUAL RETAIL PHARMACY

[Preview Receipt](#)