

De Frey en Vennote Ing.

PR.1451979 Reg 2017/095638/21 VAT # 4940174529

P.O. Box 2938

Cresta

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South Africa

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De Frey en Vennote Ing.

TRAVEL DOCTOR
C O R P O R A T E

Client : **SETE YACHT MANAGEMENT MEDICAL - NON-FOOD HANDLER**
Please send POP to : samsa@TravelDocCorp.com
PLEASE USE YOUR SURNAME / INVOICE NUMBER AS REFERENCE
WHEN MAKING PAYMENT
Upfront payment is required to schedule and book an appointment

Invoice Number SAMSА-SETE/26

Account Number COD001

Valid until 28 Feb 2026

INVOICE

Page no: 1 of 1

Our Ref	Description	Qty	Unit Price	VAT	Total Incl.
CN042	SAMSA (EXTENDED) Medical by Doctor, including	1	R 1 450.00	15.0%	R 1 450.00
	* Consultation				
	* Urine Dip Stick				
TS027	Resting ECG	1	R 295.00	15.0%	R 295.00
TS032	Stress ECG (if required / determined & payable the day of the Consultation)		R 1 100.00	15.0%	R 0.00
	Occupational Health Items				
TS010	X-Ray Chest: Reported by a Specialist Radiologist	1	R 850.00	15.0%	R 850.00
TS000	OHS - Audiometry	1	R 315.00	15.0%	R 315.00
TS008	OHS - Vision	1	R 315.00	15.0%	R 315.00
TS002	OHS - Spirometry	1	R 315.00	15.0%	R 315.00
	Laboratory Items : TO NOTE : Additional tests may be needed, and payable at time of Consultation.				
LB188	* Laboratory administration fee	1	R 79.00	15.0%	R 79.00
LB190	* Alcohol / Ethanol Test	1	R 291.00	15.0%	R 291.00
LB010	* Blood group	1	R 172.50	15.0%	R 172.50
LB026	* CRP	1	R 260.00	15.0%	R 260.00
LB038	* Full Blood Count with ESR	1	R 375.50	15.0%	R 375.50
LB044	* Glucose (FASTING)	1	R 85.00	15.0%	R 85.00
LB054	* Hepatitis A IgG Levels	1	R 385.00	15.0%	R 385.00
LB056	* Hepatitis A IgM Levels	1	R 385.00	15.0%	R 385.00
LB194	* Hepatitis B Surface Antigen (HbsAg)	1	R 385.00	15.0%	R 385.00
LB195	* Hepatitis C Screen (HCVAb)	1	R 385.00	15.0%	R 385.00
LB064	* HIV ELISA	1	R 190.00	15.0%	R 190.00
LB068	* Lipid Screen / Lipogram	1	R 480.00	15.0%	R 480.00
LB070	* Liver Function Profile	1	R 1 009.00	15.0%	R 1 009.00
LB147	* QuantiFERON-TB (0192)	1	R 1 205.00	15.0%	R 1 205.00
LB104	* RPR	1	R 350.00	15.0%	R 350.00
LB116	* U&E Creatinine (includes Blood Urea Nitrogen - BUN)	1	R 458.00	15.0%	R 458.00
LB118	* Uric acid	1	R 89.50	15.0%	R 89.50
LB128	* Urine Analysis : Drug Screen - complete	1	R 773.00	15.0%	R 773.00
LB209	* Urine Analysis : Phencyclidine (PCP) - Urine Test	1	R 572.00	15.0%	R 572.00
LB122	* Varicella IgG Levels	1	R 618.00	15.0%	R 618.00
LB220	* Varicella IgM Levels	1	R 618.00	15.0%	R 618.00
To note : * EXCLUDES DENTAL & OPTICAL CHECK-UP, PSYCHOLOGICAL EXAMINATION, ULTRASOUND, SPUTUM SAMPLES					
* Excludes any specialists referrals requirements identified during Consultation, stress ECG, other laboratory tests, which may be required depending on clinical presentation, payable on the day of the Consultation					
* Vaccines / malaria prophylaxis and medical kits are also available - to be discussed on the day of the Consultation					
RECOMMENDED VACCINES : TO DISCUSS ON THE DAY OF THE CONSULTATION					
* Yellow Fever - Stamaril @ R514.00 incl VAT					
* Tetanus Combo - Adacel @ R494.50 incl VAT					
* Hepatitis A + B - Twinrix - @ R497.00 incl VAT					
* Varicella - Varilrix / Onvara @ R650.00 incl VAT					
* MMR - Priorix @ R323.00 incl VAT					

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Payments Can be Made to:

Account name: DE FREY EN VENNOTE INC

Investec Bank Ltd, 100 Grayston Drive, Branch Code: 580105

Account no: 10013369349 Swift code: IVESZAJJ

Please send POP to: samsa@TravelDocCorp.com

Sub Total ex VAT	R 11 048.26
VAT 15%	R 1 657.24
Total	R 12 705.50
Discounts	
Balance	R 12 705.50

Notes:

- Terms : 100% to be paid upfront to secure booking
- In the event of not arriving for the scheduled appointment, the full amount will be used as a "no-show fee" and no refund will be applicable.