

Licence No. :				
Bill No: 25		Date: 2021-06-29		
Patient Name: HEMABT		Age: 54 Year	Gender:Male	
SNo.	Billing Head	Rate	Quantity	Amount
1	Dr Consultation Fee	300	1	300
2	X-RAY	300	1	300
3	CBC	150	1	150
4	D-Dimer	500	1	500
5	Nursing Charge	1500	1	1500

<b>Total Amount</b>		<b>2750 Rs.</b>	
<b>In Word : two thousand seven hundred and fifty Rupees</b>			<b>Signature</b>

<b>Payment Receipt</b>			
<b>Number : 25</b>			
<b>Received From : Hemabt</b>		<b>Amount : 2750.00</b>	
<b>Total In Word : two thousand seven hundred and fifty Rupees</b>		<b>By :</b>	
			<b>Signature</b>