

Licence No. :				
Bill No:		106	Date: 2021-05-19	
Patient Name:		RITESH	Age: 30 Year	Gender:Male
SNo.	Billing Head	Rate	Quantity	Amount
1	CBC	150	1	150

Total Amount		150 Rs.
In Word : one hundred and fifty Rupees		Signature

Payment Receipt		
Number : 106		
Received From : RITESH		Amount : 150.00
Total In Word : one hundred and fifty Rupees		By :
		Signature