

JAIN CLINIC

BUS STAND ATHNER

9424408126

Reg. No. :					
Admitn No.		3	Receipt No.		3/2024-25
Date		2024-06-27	Class		24 Year
Student Name		HOM	Gender		Male
SNo.		Particulars			Amount
1	CONTRAMAL 50MG		85.00	1	85
2	DELPHI-L SYP.		10.00	1	10

Total Amount		95 Rs.
In Word : ninety five Rupees		Signature

Payment Receipt	
Number : 3	
Received From : HOM	Amount : 95.00
Total In Word : ninety five Rupees	By :
Signature	