



Invoice

Invoice No: 252600471

Patient Name: Ms. Sunitha Balkrishnan/PW/2526/00090

Pay Mode: Cash

Invoice Date: 19-06-2025

Doctor: Dr. Namita Pandey

Sr.No.	TREATMENT	AMOUNT
1	Followup	1800.00

Total Amount: 1800.00

Less Discount (-): 0.00

Grand Total: 1800.00

Received Amount (-): 0.00

Balance Amount: 1800.00

This is a computer generated invoice hence no signature is required