



## **Invoice**

**Invoice No:** 252600479

**Patient Name:** Ms. Bimala Budhayer/PW/2526/00040

**Pay Mode:** Cash

**Invoice Date:** 20-06-2025

**Doctor:** Dr. Namita Pandey

<b>Sr.No.</b>	<b>TREATMENT</b>	<b>AMOUNT</b>
1	Followup	1500.00

**Total Amount: 1500.00**

**Less Discount (-): 0.00**

**Grand Total: 1500.00**

**Received Amount (-): 0.00**

**Balance Amount: 1500.00**

This is a computer generated invoice hence no signature is required