



Invoice

Invoice No: 252600891

Patient Name: Ms. Savita Mathur/PW/2526/00980

Pay Mode: Card

Invoice Date: 12-08-2025

Doctor: Dr. Namita Pandey

Sr.No.	TREATMENT	AMOUNT
1	Consultation	2000.00
2	USG Guided Biopsy	8873.00

Total Amount: 10873.00

Less Discount (-): 0.00

Grand Total: 10873.00

Received Amount (-): 10873.00

Balance Amount: 0.00

This is a computer generated invoice hence no signature is required