



Invoice

Invoice No: 252601910

Patient Name: Ms. Shamim Merchant/HOC/2511/01168

Pay Mode: Card

Invoice Date: 23-12-2025

Doctor: Dr. Namita Pandey

Sr.No.	TREATMENT	AMOUNT
1	Followup	1500.00
2	Stitch Removal	500.00
3	Gauze	50.00

Total Amount: 2050.00

Less Discount (-): 0.00

Grand Total: 2050.00

Received Amount (-): 2050.00

Balance Amount: 0.00

This is a computer generated invoice hence no signature is required