



Invoice

Invoice No: 252601928

Patient Name: Ms. Siddhi Sail/PW/2526/00475

Pay Mode: UPI

Invoice Date: 24-12-2025

Doctor: Dr. Namita Pandey

Sr.No.	TREATMENT	AMOUNT
1	Annals (Tomo-mamo, Dexa Scan, USG Breast, USG A+P)	12500.00
2	Consultation	2000.00
Total Amount: 14500.00		
Less Discount (-): 0.00		
Grand Total: 14500.00		
<u>Received Amount (-): 14500.00</u>		
Balance Amount: 0.00		

This is a computer generated invoice hence no signature is required