



Invoice

Invoice No: 252601996

Patient Name: Ms. Shenazz Karari/HOC/2510/01121

Pay Mode: Cash

Invoice Date: 31-12-2025

Doctor: Dr. Namita Pandey

Sr.No.	TREATMENT	AMOUNT
1	Biopsy	9245.00
Total Amount: 9245.00		
Less Discount (-): 0.00		
Grand Total: 9245.00		
<u>Received Amount (-): 9245.00</u>		
Balance Amount: 0.00		

This is a computer generated invoice hence no signature is required