



## **Invoice**

**Invoice No:** 252602009

**Patient Name:** Ms. Bhawana Gurhani/HOC/2601/01270

**Pay Mode:** Card

**Invoice Date:** 01-01-2026

**Doctor:** Dr. Namita Pandey

<b>Sr.No.</b>	<b>TREATMENT</b>	<b>AMOUNT</b>
1	Mammography Both Breasts(2D)	4130.00
<b>Total Amount: 4130.00</b>		
<b>Less Discount (-): 0.00</b>		
<b>Grand Total: 4130.00</b>		
<b><u>Received Amount (-): 4130.00</u></b>		
<b>Balance Amount: 0.00</b>		

This is a computer generated invoice hence no signature is required