



Invoice

Invoice No: 252602403

Patient Name: Ms. ruchi mittal/HOC/2509/01038

Pay Mode: Card

Invoice Date: 07-02-2026

Doctor: Dr. Namita Pandey

Sr.No.	TREATMENT	AMOUNT
1	Consultation	2000.00
2	Tomomammography - Bilateral	5630.00

Total Amount: 7630.00

Less Discount (-): 281.00

Grand Total: 7349.00

Received Amount (-): 7349.00

Balance Amount: 0.00

This is a computer generated invoice hence no signature is required