



## **Invoice**

**Invoice No:** 252602440

**Patient Name:** Ms. Rashida Yusufali/HOC/2601/01336

**Pay Mode:** Cash

**Invoice Date:** 11-02-2026

**Doctor:** Dr. Namita Pandey

Sr.No.	TREATMENT	AMOUNT
1	Consultation	2000.00
2	Major Dressing	1000.00
3	Gauze	300.00
4	Dren Bag	399.00

**Total Amount: 3699.00**

**Less Discount (-): 0.00**

**Grand Total: 3699.00**

**Received Amount (-): 3699.00**

**Balance Amount: 0.00**

This is a computer generated invoice hence no signature is required