Bill cum receipt

NAME : Mr. SENTHIL SELVAN Bill Date : 13/10/2015 01:29 PM

Patient No : P69150004385 Bill No : 69150104466

Visit No. : 69150104419 Contact No

Age/Sex : 25 Year(s) / M Email :

Ref Doctor : Mode of Delivery :

Patient History :

Client / Insurance Provider: GENERAL

| Tests | | Report Date | Amount |
|---------------------------------|---|---------------------|----------|
| Lipid Profile-2 | | 13/10/2015 07:19 PM | 500.00 |
| Payment Mode | | Taxable Value | : 0.00 |
| Cash - Indian Rupee - 425.00 | | Non Taxable Value | : 0.00 |
| | | Gross Amount | : 500.00 |
| | | Discount | : 75.00 |
| | | Service Tax | : 0.00 |
| | | Ed.Cess | : 0.00 |
| | | S.H.Ed.Cess | : 0.00 |
| | | Grand Total | : 425.00 |
| | | Net Amount | : 425.00 |
| Please Collect All Reports on | : 13/10/2015 07:19 PM | Received Amount | : 425.00 |
| Amount Received in words | : (Rupees) FOUR HUNDRED AND TWENTY-FIVE | | |
| Service Tax Registration Number | : AACCP1414ESD001 | | |

Category Of Service : Technical Testing & Analysis/Cosmetic & Plastic Surgery

BILLED BY : Mr.SENTHIL

Bill Location : Coimbatore - CBE