

Bill / Money Receipt

Patient Name :	Mrs.PERVALA PREMALAMMA	Reg. Date :	08-Feb-2023 10:34:37
Bill No :	22-23/00353310	Patient ID :	947097
Address. :		Lab No. :	0052302080008
Contact No. :		Age :	58 Y Sex : Female
Referred By :	Dr. SELF	Corporate :	MAHONIA MULTISPECIALITY HOSPITAL
Collector :		Lab Boy :	
Comments :			
Remarks :			

Sr.No	Test Name	Barcode	SampleType	Panel Code	Delivery Date	Test Rate
1	SARS-CoV-2 Qualitative RT PCR	24079551	Viral Transport Medium	SPL-STS-744	08-Feb-2023	300.00

Gross Amount : 300

at 08-Feb-2023 10:34:37

Discount Amount: 0.00

Net Amount: 300.00

Paid Amount : 0.00

Due Amount : 300.00

