



BILL/RECEIPT

Original

Name Mr.DD
Age/Gender 34 Y 0 M 0 D /Male
Contact No.
Address Noida,Noida
UHID ITS.0000000117
PanelName STANDARD

Bill ITSB/22-23/00001565
Visit/Reg. Date 27-Mar-2023 01:17PM
Referred By SELF
Visit No. ITS1565
Home Collection No
PRO
INSTITUTOR

#	Test Code	Test Name	Barcode No.	Token No.	Rate	Discount	Total
1	7859	THYROID PROFILE (T3,T4,ULTRASENSITIVE TSH)(7859)	10060196	2	550.00	0.00	550.00

Settlement	Payment	Receipt No.	Mode	Currency	Amount	TransactionID	Received By
Settlement	27-03-2023	ITSR/22-23/00000899	Cash	INR	550.00		Itdose Team Admin

Bill Amount : 550.00
Total Discount : 0.00
Net Bill Amount : 550.00
Total Paid Amount : 550.00

Received with thanks : Five Hundred and Fifty

For Online Report: ID: IDITSA00140 Password: 722JAU
Online Patient reports available for 7 days.
Timings : Apr-Oct 8am - 8pm, Nov-March 8.30am - 7.30pm | Sunday 8am-1pm

Signature