



BILL/RECEIPT

Name Baby.T KYLA ANAYA
Age/Gender 12 Y 0 M 0 D /Female
Contact No. 9999999999
Address Ameerpet,Hyderabad
UHID YOD.0000242380
PanelName INTERO CLINICS,
Email

Bill DYODB/22-23/00211377
Visit/Reg. Date 17-Jan-2023 07:42PM
Referred By Dr.SELF
Visit No. YOD251553
Home Collection No
PRO RAMAKRISHNA
Passport No

#	Test Code	Test Name	Barcode No.	Token No.	Rate	Discount	Total
1	PATH004	CUE (COMPLETE URINE EXAMINATION)	10332817	39	200.00	0.00	200.00
2	HEMAT017	CBP(COMPLETE BLOOD PICTURE)	10332817	112	300.00	0.00	300.00
3	13321	RENAL PROFILE	10332817		600.00	0.00	600.00
4	SIM021	C-REACTIVE PROTEIN (CRP)	10332817	103	400.00	0.00	400.00

Settlement	Payment	Receipt No.	Mode	Currency	Amount	TransactionID	Received By
Settlement	17-01-2023	DYODR/22-23/00047069	Mobile Wallet	INR	1500.00	338345410676	Sandhya Jinkala

Bill Amount : 1500.00
Total Discount : 0.00
Net Bill Amount : 1500.00
Total Paid Amount : 1500.00

Received with thanks : One Thousand Five Hundred

For Online Report: Visit www.yodalifeline.in, UserID: IDYODC51700 & Password: U37YWJ
For any queries Contact-040-35353535, Email-helpdesk@yodalifeline.in

Signature