DOYEN DIAGNOSTIC AND RESEARCH FOUNDATION

87/G/2, R.N. Tagore Road, Berhampore Murshidabad- 742101 WEST BENGAL,7277370071 / 9832514328

BILL / MONEY RECEIPT

Bill No.: 1 **Date:** 17/08/2025

Name.: KAMELA BIBI **Time:** 02:39:59

Add/Ph.: **Age/Gender:** 46 Yr / MALE

Referred by.: DR NOOR ALAM
Associate: RVH **Sub Associate:**

Test Parameter	Rate
Glucose Fasting	80.00
TSH (Thyroid Stimulating Hormone)	350.00
Urine RE (Routine Examination)	100.00
Urine Culture & Sensitivity	490.00
Collection Charge	0.00
Total Value	**1020.00**

Authorised Signatory