

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

BILL / MONEY RECEIPT

Bill No.:14

Name.:MALINA BIBI

Add/Ph.:

Referred by.:S.K.MONDAL

Associate:KRMP

Date:08/12/2025

Time:02:23:35

Age/Gender:34 Yr / FEMALE

Sub Associate:

Test Parameter	Rate
Hb (Haemoglobin)	80.00
Urea	150.00
Creatinine	150.00
Uric Acid	180.00
RA (Rheumatoid Factor) Test	510.00
Calcium(Serum)	290.00
Collection Charge	0.00
Total Value	1360.00

Authorised Signatory