

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

BILL / MONEY RECEIPT

Bill No.: 4

Name.: URMILA KHATUN

Add/Ph.:

Referred by.: DR.S.DAS

Associate: B.SK

Date: 30/03/2026

Time: 02:22:05

Age/Gender: 23 Yr / FEMALE

Sub Associate:

Test Parameter	Rate
LFT (Liver Function Test)	750.00
Prothrombin Time with INR	350.00
Glucose Fasting	80.00
Urine RE (Routine Examination)	100.00
Collection Charge	0.00
Total Value	1280.00

Authorised Signatory