



HARSHA HOSPITALS

Plot No.141&144/1,Sapthagiri Colony,
Kukatpally,Hyderabad-500072,Ph:23066393.
fax:040-23067193,E-Mail:info@harsha-hos

OP Bill - Cum - Receipt

Pt Name : Mrs.G.NAGAMANI

Bill No : BIL9969

Bill Dt : 04-Feb-2017

UMR NO : UMR17010007

Age/Sex : 30Y(s)/Female

Phone : 9886944494

Ref By : WALKIN

Consultant : M.NEETHA

SINo Service Name

1 DOUBLE MARKER

2 ANTENETAL PROFILE + TSH

Service Cd

Qty

Rate

Amount (Rs)

BIO0070

1

2,200.00

2,200.00

HCP2

1

1,600.00

1,600.00

These Services Are Under Package

HAEMOGRAM

HBSAG

CUE (COMPLETE URINE EXAMINATION)

BLOOD GROUP AND RH (D) TYPING

VDRL

TSH (THYROID STIMULATING HORMONE)

HIV I & II ANTIBODY

RBS (RANDOM PLASMA GLUCOSE)

Bill Amt

Emp Payable Amt

Receipt Amt

:

:

:

3,800.00

3,800.00

3,800.00

Card ExpDt

Card No

: 04-Mar-2020

: 1550

Cheque Amt 0.00

Card Amt : 3,800.00

Card Bank : STATE BANK OF INDIA

Received with thanks from G.NAGAMANI. A Sum of 3,800.00/-

In Words : Three Thousand Eight Hundred Rupees Only

Create By : PRASHANTI

Print By : PRASHANTI

Create Dt : 04-Feb-2017 02:50:56 pm

Print Dt : 04-Feb-2017 02:50:58 PM

UMR17010007

BIL9969



(Authorised Signatory)