

INVOICE / RECEIPT

Billed To: Invoice #: MED-00004

Katu Ann

Date Issued: September 25,

annetkatushabe891@gmail.com

Due Date: N/A

#	Description	Quantity	Unit Price	Amount
1	Consultation with Dr. Okwi Yakub	1	UGX 50,000	UGX 50,000
2	Medicine Fee	2	UGX 30,000	UGX 60,000

Subtotal: UGX 110,000

Amount Paid: UGX 100,000

Amount Due: UGX 10,000

Total Amount: UGX 110,000

Status: PARTIALLY

PAID

Thank you for your business!

MedCare Hospital Management

System

127.0.0.1:8001/billing/4/receipt/