

India's 1st NABH Accredited Chain of Medical Imaging Centers



National Accreditation Board for Hospitals & Healthcare Providers

RECEIPT

Receipt No.: I - 64713 Name: Mr. Amit Joshi (Male / 42 years) Patient ID: 62317

Payment Mode: DEBIT CARD Referral: Dr. Vishal Choudhari Date: 12/05/2023

Sr. Test Name Test Price

1 MRI CERVICAL SPINE 20000.00

Payable Amount (in words): Twenty Thousand only

Total:20000.00

Payable Amount :20000.00

Total Paid: 20000.00

Cashier's Signature

GNOS/COP