

Date: August 5th 2020, 7:20:45 pm

## Invoice OPD

Hospital Details:

110120080510004 Asiri Hospital No 1 Main Street

Colombo 08

0777112233

Patient Details:

1101000004

gaya;a 33 years Male 333 333 3333

## Items

Description	Amount
Doctor Fee	Rs. 1500.00
Drug Fee	Rs. 0.00
Hospital Fee	Rs. 100.00

SUB TOTAL Rs. 1600
FINAL TOTAL Rs. 1600

Your token Number is 4

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