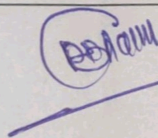


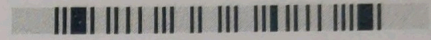
BOKIL METROPOLIS SATARA**BILL / RECEIPT****NAME -MAYUR BARGE****DATE -19-08-24****AGE- 28 YRS****SEX-MALE****BILL NO- 240214104827901****CLIENT NAME - AJINKYATARA HOSPITAL SATARA****TEST NAME****CHARGES****1 CULTURE & SENSITIVITY, AEROBIC BACTERIA OTHER SAMPLES****1200****NET AMOUNT****1200****AMOUNT PAID****1200****BALANCE AMOUNT****0****LAB INCHARGE**

Ajinkyatara Multispeciality Hospital PVT.LTD.

500 A/8, Sadar Bazar, Opp. Civil Hospital, Satara.

Phone No : 02162-239027 , 7719077890 Email : ajinkyatarahospital@gmail

OP Receipt



UHID \ Visit No : 06399 \ IP0001
OPD No :
Patient Name : Mr MAYUR BALKRISHNA BARGE
Gender : Male Age : 28 Y 0 M 5 D
Doctor : Dr. SANJAY PATIL
Doctor Dept : General Surgery

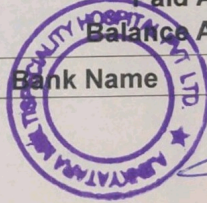
Receipt No : 7150
Bill Date : 19/08/2024 19:02:46
Ref Doctor :
Category : Self Pay

Service	Doctor	Unit	Concession	GST Amount	Amount
CXR		1.00	0.00	0.00	500.00

Total Receipt Amount : 500.00
Concession Amount : 0.00
Net Amount : 500.00
Paid Amount : 500.00
Balance Amount : 0

Amount In Words- Rupees Five Hundred Only
Payment details

Srn. No	Mode	Amount	Date	Chq/DD/Card No	Bank Name	E-trn/Card trn no
1	Cash	500	19/08/2024			0



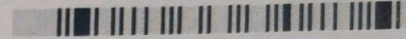
Authorised Signature

Ajinkyatara Multispeciality Hospital PVT.LTD.

500 A/8, Sadar Bazar, Opp. Civil Hospital, Satara.

Phone No : 02162-239027 , 7719077890 Email : ajinkyatarahospital@gmail

OP Receipt



UHID \ Visit No : 06399 \ IP0001

OPD No :

Patient Name : Mr MAYUR BALKRISHNA BARGE

Gender : Male Age : 28 Y 0 M 5 D

Doctor : Dr. SANJAY PATIL

Doctor Dept : General Surgery

Receipt No : 7181

Bill Date : 23/08/2024 18:03:38

Ref Doctor :

Category : Self Pay

Service	Doctor	Unit	Concession	GST	Amount
CXR		1.00	0.00	0.00	500.00

Total Receipt Amount : 500.00

Concession Amount : 0.00

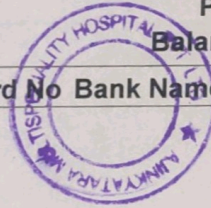
Net Amount : 500.00

Paid Amount : 500.00

Balance Amount : 0

Amount In Words- Rupees Five Hundred Only
Payment details

Srn. No	Mode	Amount	Date	Chq/DD/Card No	Bank Name	E-trn/Card trn no
1	Cash	500	23/08/2024			0



[Signature]

Authorised Signature



SAMPRAPTI DIAGNOSTICS CENTER

BILL /RECEIPT

Date : 19/08/2024
Name : **MR. MAYUR BARGE**
Ref by : AJINKYATARA HOSPITAL
Center : Samprapti Diagnostic Center

Bill No: 6188190824
Age: 27 Yrs.
Sex: M
Phone:

Particulars	Amt
HIV	350/-
BT CT	100/-
CBC.	250/-
ELECTROLYTE	500/-
HBsAg	350/-
PROTHROMBIN TIME	350/-
RBS	50/-
UREA CREAT	300/-
URINE ROUTINE	100/-

Gross Amount

2350/-

Net Amount

2350/-

Amount Paid

2350/-

Balance Amount

0/-

