

Billing Receipt

Bill ID: KAR-FL-001-20260115-991
Date: 2026-01-15
Time: 02:07 PM
Payment Mode: cash

Patient Details

Name: flex
Phone Number: 6677889900
Visit Number: 1
Doctor: N/A
Nurse: Testing nurse akka
Location: karur
Member ID: A00F13984

Services

SNo	Particular	Details	Amount	Discount	Net
1	123	-	1152.00	10.00	1152.00

Financial Breakdown

Subtotal (Services after individual discounts): 1152.00
Overall Discount (Applied to subtotal): 115.00
Total after Overall Discount: 1137.00
Membership Fee: None
Total with Membership Fee: 1137.00
Membership Offer: None
Final Total: 1137.00

Additional Information

Reference: sdf
Review Date: 2026-01-16