

Billing Receipt

Bill ID: UNK-AS-001-20260131-947
Date: 2026-01-31
Time: 12:38 PM
Payment Mode: cash

Patient Details

Name: asdf
Phone Number: 5566778899
Visit Number: 1
Doctor: N/A
Nurse: Testing nurse akka
Location: N/A
Member ID: A00F18916

Services

SNo	Particular	Details	Amount	Discount	Net
1	asd	-	1200.00	10.00	1200.0

Financial Breakdown

Subtotal (Services after individual discounts): 1200.00
Overall Discount (Applied to subtotal): 110.00
Total after Overall Discount: 1190.00
Membership Fee: None
Total with Membership Fee: 1190.00
Membership Offer: None
Final Total: 1190.00

Additional Information

Reference: asd
Review Date: N/A