## **INVOICE CUM RECEIPT**

CLIENT CODE: C000119167

CLIENT'S NAME AND ADDRESS:
SRL PSC GORAKHPUR (HOME COLLECTION)
AKSHAYBAR SINGH BHAWAN, CIVIL LINES, 7 PARK ROAD,
GORAKHPUR
273001
UTTAR PRADESH
INDIA

**SRL** Diagnostics

SRL LIMITED

45-M, Betiahata, Hanuman Mandir Road,

Gorakhpur, 273001 UTTAR PRADESH, INDIA

Tel: 9111591115, Fax: CIN - U74899PB1995PLC045956

TRF No/Receipt No:

8601366999 9311426484

9704UE10050/1

TRF Date: 13/05/2021 10:48:46 AM

Name

MR.AJAI SRIVASATAV

**ID** AJAIM211053185

Print Date: 15/05/2021

Ref. Doctor Name:

SELF

| Test Code | Test Name                                | Amount   |
|-----------|--|----------|
| 4200      | D-DIMER, PLASMA                          | 1,600.00 |
| 1535N     | C-REACTIVE PROTEIN, SERUM (QUANTITATIVE) | 450.00   |
| 3170      | FERRITIN, SERUM                          | 950.00   |
| CMP67     | COMPLETE CARE ESSENTIAL                  | 1.399.00 |

Total: 4,399.00

Other Charges: 0.00 Net Amount: 4399

Advance Amount: 0.00

Paid Amount: 4,399.00

Balance Amount: 0.00

Amount In Words

Four thousand three hundred and ninety-nine Rupees and Zero Paise