

# INVOICE

Invoice #:

INV-1-7-20251221215637

Invoice Date:

2025-12-21 21:56:37

Patient ID:

1

Due Date:

2025-12-21 21:56:37

BILL TO:

Patient Name: Tarun B K

BMI ASSESSMENT DETAILS:

Height (cm):	220.0
Weight (kg):	110.0
BMI Value:	22.73
BMI Category:	Normal

CHARGES:

Description	Amount
Consultation Fee	■500.00
BMI Assessment Fee	■300.00
Health Report Fee	■200.00
TOTAL	■1000.00

PAYMENT TERMS:

Due within 30 days

PAYMENT STATUS:

Pending

*This is an official invoice from BMI Health Tracker. Payment must be received as per the terms mentioned above. Please make payment to the account details provided separately.*