



Patient Name : Rohit Linge

Disease : Fever

Consulting Dr. : Yash

UH I'd Number : AH112032025

Receipt No. : RC1724032025

Receipt Date : 2025-03-25

Billing

| No | Summary | Quantity | Amount |
|-------------|---------------------|----------|---------|
| 1 | Consultation fee | - | 233 |
| 2 | X-Ray | 2 | 1000 |
| 3 | Liver Function Test | 1 | 770 |
| Grand Total | | | 2003.00 |