

KVR HOSPITAL

Tourist Hotel Backside, Sanjeevanagar, NANDYAL 518-501

Phone No : 08514 - 220234

OP Receipt

Patient Name : Miss. V VANGAVI
Age & Gender : 23 Years & Female
UHID/UMR No : 2308295
Reg.Date : 28/03/2023 08:03 PM
OP Number : 230328132
OP.Date : 28/03/2023 8:03 PM
Bill Type : Cash
Phone Number : 2852588258
Address : nandyal,

Sponsor (Company) : General		Department : General Medicine	Consultant : Dr.K V SOMASEKHAR REDDY	
S.No	Service Name	Charges	Bill No	Amount
1	Consultant	Consultant Charges	230328132	200.00
Two Hundred Rupees Only				Rs. 200.00
Registration-UPI :		Card Amount : 0.00	Cash Amount : 0.00	Total : 0.00
Cash Amount : 200.00				Total : 200.00

Note2 : This card valid up to Dt : 31/03/2023




Authorized Signature

PALLAVI MEDICALS

Tax Invoice Bill

Tourist Hotel Backside, Sanjeevanagar, NANDYAL 518-501

Phone No : 08514 - 220234

GST No : 37AYWPK0090Q1Z1 DL No :

Patient Name : VSANGAM

Bill No & Dt : M71996 &
28/03/2023 08:46 PM

Sponsor (Company) :

Department :

Consultant :

S.No.	Product Name	HSN Code	Batch No.	Sch No	Exp.d.t.	Qty.	Rate	Disc.	CGST%	CGST Rs	SGST%	SGST Rs	Amount
1	Omnacortil 10 Mg Tab	30043912	GPG23023A		12/2026	10	1.20	0.00	6.00	0.64	6.00	0.64	12.00
2	Bronchoflo CAP	30049094	GC220615		10/2024	10	9.00	0.00	6.00	4.82	6.00	4.82	90.00
3	Tossexnew Syp	30049099	twa23002	G	07/2024	1	186.80	0.00	6.00	10.00	6.00	10.00	186.80
4	formosone 250	30049094	i205090		05/2024	1	436.50	0.00	6.00	23.38	6.00	23.38	436.50
Total CGST Rs : 38.84		Total SGST Rs : 38.84		Total IGST Rs : 0.00		Total Amount : 725.00							

Cash Amount : 725.00

Rs. 725

Seven Hundred Twenty Five Rupees

Payment Mode : Cash

Authorized Signature



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28/03/2023 08:46 PM