

## BILL AND RECEIPT

**Patient Name:** Prachi Srivastav  
**Patient ID:** MED51  
**Phone No:** 9073414569  
**Email:** yashrajsingh.socialmedia@gmail.com  
**Appointment:** 08-06-2025 05:00 pm  
**Bill No:** INV-49  
**Date:** 08-06-2025 04:43 pm  
**Payment ID:** pay\_QegIcFJoVJkejv  
**Order ID:** order\_QegIS0sJ6NYnMA  
**Consultant:** Dr. Sharat Damodar

Particulars	Date	Qty	Unit Rate	Amount ( )
Video Consultation - Dr. Sharat Damodar	08-06-2025	1	1200.00	1200.00
Registration Fee	08-06-2025	1	350.00	350.00

Total Hospital Charges: 1550.00

GST (18%): 279.00

**Total Amount: 1829.00**

Amount Paid: 1829.00

**Balance: 0.00**

GSTIN: 19MEDICONNECT1Z9

Payment Status: CAPTURED

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