

LAB TEST BILL AND RECEIPT

Patient Name: Prachi Srivastav
Patient ID: LAB17
Phone No: 9073414569
Email: yashrajsingh.socialmedia@gmail.com
Collection: Sample collection to be scheduled
Bill No: LAB-INV-50
Date: 08-06-2025 04:50 pm
Payment ID: pay_QegP1zZ1gMfW3d
Order ID: order_QegOuuXQ4XGy0Z
Sample Type: Blood

Particulars	Date	Qty	Unit Rate	Amount ()
Complete Blood Count (CBC) - Lab Visit		1	599.00	599.00
Lab Registration Fee		1	50.00	50.00

Total Lab Charges:649.00
GST (18%):116.82

Total Amount:766.00
Amount Paid:766.00

Balance:0.00

GSTIN: 19MEDICONNECT1Z9

Payment Status: CAPTURED

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