



JABALPUR HOSPITAL & RESEARCH CENTRE

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OPD PROCEDURE RECEIPT

ORIGINAL COPY

RECEIPT NO.: JHR24250015052
UHID : JHU23240119528
PATIENT NAME : MRS. ANUSHRI DUBEY
AGE / SEX : 27Y / FEMALE
CONSULTANT : DR. PRIYA DUGGAL
DEPARTMENT : CONSULTING DEPARTMENT
ADDRESS : SANT JALA RAM BAPU NAGAR TILAHARI , JABALPUR
DATE TIME : 27/04/2024 11:31 AM
VISIT ID : JHP24251403804
F / H NAME : AVINASH DUBEY
MOBILE NO. : 9630062321
CORPORATE : CASH
REFERRED BY : . HOSPITAL CASE

SNO	Procedure/Services Name (Qty.)	Amount
1.	ANC CARD	500.00

Total Bill Amount 500.00
Amt to Be Paid (FIVE HUNDRED ONLY) 500.00
Paid Amount 500.00

PREPARED BY: MUKESH SHRIYAS (27/04/2024 11:31 AM)

SNO Mode of Payment
1 Cash

Amount 500.00
Reference No.