

Smart Clinic & Research Center

Radiology Invoice

Address: 25 Kings Street, CA Phone No.: 89562423934

Email: medisync@gmail.com

Website: www.medisync.in

Patient Name:	Cameron Williamson	Age:	28
Test Name	Magnetic Resonance Imaging	Bill No	RAD-889QO
Email:	mariaw@gmail.com	Phone:	98767564567
Gender:	Female	Doctor:	Rina Malik
Department:	Pathology Department	Payment Mode:	Cash
Source	Offline	Status:	Approved

Payment Details

Charge	Тах	Discount	Amount
680	18	0	₹802.4

This is a computer-generated invoice. No signature is required.