

Smart Clinic & Research Center

Radiology Invoice

Patient Name:	Franklyn Gomes	Age:	25
Test Name	Cardio Pulmonary Exercise Test	Bill No	RAD-INQVP
Email:	mariaw@gmail.com	Phone:	8767567687
Gender:	Male	Doctor:	Jane Doe
Department:	Pathology Department	Payment Mode:	Cash
Source	Offline	Status:	Approved

Payment Details

Charge	Tax	Discount	Amount
820	18	20	₹947.5999999999999

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