

## Smart Clinic & Research Center

### Appointment Invoice

<b>Patient Name:</b>	Cody James Fisher	<b>Appointment No:</b>	APP-BMPO34
<b>Age:</b>	32	<b>Appointment Date:</b>	2025-12-09T18:30:00.000Z
<b>Email:</b>	mariaw@gmail.com	<b>Phone:</b>	9876567876
<b>Gender:</b>	Male	<b>Doctor:</b>	Harry Potter
<b>Department:</b>	Doctor Department	<b>Payment Mode:</b>	Cash
<b>Live Consultation:</b>	No	<b>Status:</b>	Approved
<b>Source</b>	Offline		

### Payment Details

Standard Charge	No of Hour	Applied Charge	Tax	Discount	Amount
500	1	500	18	0	₹590

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