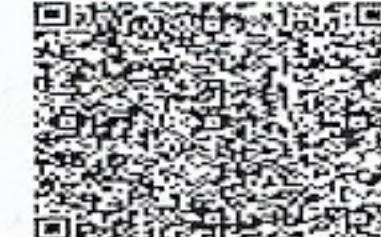


"BAJAJ ALLIANZ GENERAL INSURANCE COMPANY LIMITED"



**Dr. B L Kapur Memorial Hospital**  
**Pusa Road New Delhi Pin Code: 110005**  
**Ph:30403040 E-mail : info@blkhospital.com**

**Bill of Supply****\*670967925\***

**Patient Name** : Mrs. ANIJA BANO  
**Age/Sex** : 63 years 8 months 16 days / Female  
**Address** : RC C-47, DABRI EXTN, PALAM VILLAGE SOUTH WEST  
**Referred By** : Deep Goel

**Bill Date** : 17/09/2021 11:41AM  
**MaxId** : BLKH.967925  
**Bill No** : BLCS464755  
**Receipt No** : BLRC414030  
**GSTN Bill No:** 67210D0000307085  
**GSTN No** : 07AAATL0242R2ZE

No.	Services	SAC	Qty	Base Price(Rs.)	Tariff Price(Rs.)	Discount	Net Amount (Rs.)	Tax Amt (Tax %)	Bill Amoun (Rs.)
1	Registration Charge ()	999312	1	200.00	200.00	0.00	200.00		200.00
2	Deep Goel (Consultation ) Surgical Gastroenterology Bariatric & MAS ()	999312	1	1500.00	1500.00	0.00	1500.00		1500.00
<b>Total :</b>				0.00	1700.00				1700.00

**Paid by Patient** : 1700.00

Amount in Words : Rupees one thousand seven hundred only collected from patient

Sum Of Rs. 1700.00 received with thanks from Mrs. ANIJA BANO

**Payment Mode(s)**

CC for Rs.1700.000(CC No. :XXXXXXXXXXXX5822 )

Signature of Patient/Next of Kin



**Place of Supply** : DELHI-( 07)  
**Company Name** : Dr. B L Kapur Memorial Hospital  
**PAN No.** : AAATL0242R