

**Patient:** Mr. Om

**Age/Sex:** 19/Male

**Email:** rs.kcs.shubham@gmail.com

**Mobile:** 7302034233

**Address:** Haridwar, Chandigarh, India -

**MR No:** 23091411004778

**Booking No:** IPD2324000001314

**Booking Date:** 14/09/2023

**Admission Date:** 14/09/2023 10:00 AM

**Discharge Date:** 21/09/2023 11:00 PM

**Dear Mr. Om,**

Thank you for making a reservation with us for your upcoming journey towards Holistic Wellness. we are pleased to confirm the booking on the basis of following details:

S.No	Description	Nights x count	MRP	Tax	Total
1	Standard Single Room Charges	7 x 1	2000	0	14000
2	Treatment/Medicated food charges	7 x 1	4000	0	28000
3	Standard Tripple Room Charges	7 x 1	3000	0	21000
4	Treatment/Medicated food charges	7 x 1	6000	0	42000
					<b>Total Amount : 105000 /-</b>
					<b>Net Payable : 105000 /-</b>
					<b>Received Amount : 105000 /-</b>
					<b>Balance Amount : 0 /-</b>

**Note:**

- Please provide residence ID with photo Identity card approved by govt. of all adult person at the time of admitted.
- This booking is non refundable in any circumstances, please refer <https://patanjaliwellness.com/term&condition.php>

**Thanks and Regards,**

Patanjali Wellness Booking Team

**This is computer generated reservation and does not require any signature.**