

INCISIVESOFT

Created By:

Token: Printed On:14-02-2017 12:34:49

OPD Room # ER

| RECEIPT #: R-14021233-2025 REGISTRATION #: MR-1409-0023 Patient: Mr. Muhammad Khalid | | | Date: 14-02-2017 | |
|--|---------------------|---------------------------|--------------------|--------------------|
| | | Time: 12:34 Sex : Male | | |
| | | | | F / H: Jalil Ahmed |
| OPD DOCTOR: | | | Cell#: 03442441110 | |
| S.No | CHARGES DESCRIPTION | AMOUNT | | |
| 1 | SLIDES PREPARATION | 300 | | |
| Total Bill | Discount Amount | Recieved | Due Amount | |
| 0.00 | 0.00 | 300.00 | 0.00 | |

Note: Service charges will be taken separately.

** This is computer generated slip, No signature required **