

INCISIVESOFT

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OPD Room # ER

RECEIPT #: R-11020445-1957			Date: 11-02-2015
REGISTRATION #: MR-1409-0001			Time: 04:48
Patient : Mr. Mul	hammad Nouman		Sex : Male
F/H: Nouman			Age : 22 Y
OPD DOCTOR : Dr Baligh Ud Din RMO			Cell#: 03158078505
S.No	CHARGES DESCRIPTION	AMOUNT	
1	ESR (Erythrocyte Sedimantation Rate)	100	
2	HB %	150	
Total Bill	Discount Amount	Recieved	Due Amount
550.00	0.00	550.00	0.00

Note: Service charges will be taken separately.

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