

**Receipt Number :** HEX0718

**Date(DD/MM/YYYY)**: 26/02/2023

Name of Patient: Yash Bansal

Name of Treating Doctor: Dr. Apollo Kumar

**Email of Treating Doctor :** apollo.kumar@apollo.hospitals

Code	Description	Qty	Total
012	Doctor's Fees	5	5,000.00
034	Medical Expenses	10	20,000.00
045	Equipments Used	3	15,000.00
067	Oxygen Cylinder	1	10,500.00
099	Super Deluxe Room	1	55,000.00

Sub total (in Rs):- 1,05,500.00

Taxes:-1,055.00

Total (In Rs):- 1,06,555.00

Signature

Yash Bansal