

# Lab Statement Report of November/2021

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Date: 25/11/2021 To 25/11/2021

Printed By: Admin

Reg No self	Patient Name	Date	Test Name	Discount1	Discount	Amount	Dr Amt	Balance	Net Payble
			1						
55	Mr SSSSSSSSSSSA	25-11-21		0.00		850.00	300.00	850.00	0.00
56	Dr 11111111	25-11-21		0.00		250.00	0.00	250.00	0.00
57	Mr 12121	25-11-21		0.00		250.00	0.00	250.00	0.00
58	Mr ddddd	25-11-21		0.00		250.00	0.00	250.00	0.00
59	Mr Testing Record	25-11-21		100.00		250.00	0.00	0.00	0.00
			Total			<b>1,850.00</b>	<b>300.00</b>	<b>1,600.00</b>	<b>0.00</b>
						<b>1,850.00</b>	<b>300.00</b>	<b>1,600.00</b>	<b>0.00</b>