

BILL / MONEY RECEIPT

Bill No.: 11 **Date:** 14/04/2022
Name.: MOKBUL SK **Time:** 03:51:33
Add/Ph.: **Age/Gender:** 41 Yr / MALE
Referred by.: M.O **Sub Associate:**
Associate: MNTS

Test Parameter	Rate
Thyroid Stimulating Hormone(TSH)	300.00
Collection Charge	0.00
Total Value	300.00

Authorized Signatory