

BILL / MONEY RECEIPT

Bill No.: 1 Date: 07/05/2021
Name.: PROSENJIT MARJIT Time: 06:01:28
Add/Ph.: Age/Gender: 0 Yr / MALE
Referred by.: DR SELF
Associate: D1 Sub Associate:

Test Parameter	Rate
Glucose Fasting	50.00
Glucose PP (Post Prandial)	50.00
Collection Charge	0.00
Total Value	100.00

Authorised Signatory