

DATACLICK PATHOLOGY LAB

INVOICE

 H.NO - 14 - 55 Bharwari Kaushambi UP India 212201
 +91 7310095239

Invoice No: 10
Date: 16-09-2026 05:36 PM

(Please keep this receipt safe. It is required for report collection.)

BILL TO

Patient Name	DEEPAK SINGH	Patient ID	IPD / 10
Age / Gender	20 Year / Male	Mobile No	7310095239
Address	BHARWARI	Collection Date	16-09-2026
Referred By	Self	Reporting Date	16-09-2026

Test	MRP (Rs.)	Disc %	Total Cost
Complete Blood Count (CBC)	300.00	-	300.00
Liver Function Test (LFT)	600.00	5%	570.00
Kidney Function Test (KFT/RFT)	600.00	-	600.00
TOTAL	1500.00		1470.00

Payment Mode: Amount Paid:
Cash 1000.00

Total Amount	1500
Total Discount	30
Payable Amount	1470
Received Amount	1000
Pending Amount	470

Thank you for choosing DATACLICK PATHOLOGY LAB.
Wish you a speedy recovery! Get well soon.

Authorised Signature

Computer Generated Advanced Invoice Cum Cash Receipt • No Physical Signature Required