

Sl. No. -

Dialysis / Digital X-Ray / CT Scan

Hospital _____
Health District, _____
District, _____

Voucher for Free Services from PPP Diagnostic Lab

Patient Name Rosira Biti

Age 28 yrs Sex F

Address P.5. Talawana, Dist- Bankura

Register Id : _____ Date : 1.7.19

Treating Doctor Name : _____

Patient Mobile No. : _____

MAJYAMULLER ROG NIRNOY
Superintendent
~~Dr. Pradyumn Chandra~~
DIPLOMA IN
PASCHIMBANGA SARVA
Health Officer, JOUTHA UDYOG
BMRC HOSPITAL ER JOUTHA UDYOG District
BISHNUPUR DISTRICT HOSPITAL

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Received the services and I have not paid any amount for the service.

Signature of the Patient Talawana

MAJYAMULLER ROG NIRNOY
Superintendent
~~Dr. Pradyumn Chandra~~
DIPLOMA IN
PASCHIMBANGA SARVA
Health Officer, JOUTHA UDYOG
BMRC HOSPITAL ER JOUTHA UDYOG District
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