

Sl. No. -

Dialysis / Digital X-Ray / CT Scan

Hospital

Health district,

District

Voucher for Free Services from PPP Diagnostic Lab

Patient Name Laxmi Begdi

Age 47 Sex F

Address Prathaslain Bankura

Register Id : \_\_\_\_\_ Date 2.7.19

Treating Doctor Name : \_\_\_\_\_

Patient Mobile No.: \_\_\_\_\_

**NAJYANMULLER BOG NIRNOY**  
**DI Superintendent**  
**PASCHIMBANGA SARKAR-0**  
**BMRC HOSPITAL-ER JOUTHA UDYOG**  
**Health district HOSPITAL** District

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

Signature of the Patient

**NAJYANMULLER BOG NIRNOY**  
**Superintendent**  
**DIALYSIS PATIENTS**  
**PASCHIMBANGA SARKAR-0**  
**BMRC Health district HOSPITAL** District