BM	Register Id: Treating Doctor Name: Patient Mobile No.:	Age 40448 Address  PFS - OM	Voucher for Fr	Si No
NAJYAMULLER ROG NIRNOY  Supering Badding EVA  PASCHAMBANGAIGSBIRAR-O  BMECHOSPHAL-ER JOUTHA UDYOG  [PHEBING DISTINCT HOSPITAL DISTRICT	Ime:Date?、アパク	noa-Benkura	Health district,  District  Voucher for Free Services from PPP Diagnostic Lab  atient Name Mondy Mullingiee	Dialysis / Digital X-Ray / CT Scan Hospital
Signature of the Patient AJYAMULE DIAY PASCHMEA	Received the services and I have not paid any amount for the service.	Register Id:	Voucher for Free Services for Patient Name Months	SI. No

alysis / Digital X-Ray / CT Scan \_Hospital

\_\_ District

from PPP Diagnostic Lab

\_\_ Date \_

\_ District