

2170

Balurghat District Hospital  
Dakshin Dinajpur District  
Voucher for Free Service from PPP Diagnostic Lab

Patient Name: *Abhinit Chakraborty*

Age: *44 yrs* Sex: *M*

Address: *North Chakraborty*

Register Id: *25405* Date: *19/11/19*

Treating Doctor

Name: .....

Patient Mobile Number: *99332734474*

*P. Das*  
Full Signature of the attending Doctor  
District Hospital Balurghat  
Dakshin Dinajpur



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Age: *44 yrs* Sex: *M*

Address: *North Chakraborty*

Register Id: *25405* Date: *19/11/19*

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

Signature of the Patient

*P. Das*  
Full Signature of the attending Doctor  
District Hospital Balurghat  
Dakshin Dinajpur

