IN PATIENT SUMMARY BILL

UHID : MH31092 Bill No : MMH/MH/IP202402122

IP No : IP2024002134 Bill Date : 03/10/2024

Patient name : Mr.NATARAJAN.S DOA : 24/9/2024 2:29PM

Age : 80 Y 2 M 11 D/Male DOD

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description				Amount
1	ADMINISTRATION CH	₹	350.00		
2	BED CHARGES	₹	69,500.00		
3	DIET CHARGES	₹	5,500.00		
4	DUTY MEDICAL OFFI	₹	3,750.00		
5	EQUIPMENT	₹	76,800.00		
6	INTENSIVIST CHARGE	₹	13,500.00		
7	LABORATORY	₹	43,392.00		
8	NURSING CHARGE	₹	13,000.00		
9	PHYSIOTHERAPY	₹	4,900.00		
10	PROCEDURE CHARGE	₹	1,000.00		
11	PROFESSIONAL TEAM	₹	30,000.00		
12	RADIOLOGY			₹	11,275.00
13	TRANSPORT			₹	1,000.00
Tax A	Amount :	1,787.50	Gross Amount	₹	275,754.50
			Net Payable	₹	275,755.00
			Advance Amount	₹	150,000.00
			Received Amount	₹	125,755.00

Received Amount in Words : Two Lakh Seventy-Five Thousand Seven Hundred SUDHA

Fifty-Five Only

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	10/3/2024	MMH/MH/REDH202421734	CHEQUE	Collected Amount	1,497.00
2	9/24/2024	MMH/MH/RECH202403732	CARD	Advance Amount	30,000.00
3	9/27/2024	MMH/MH/RECH202403778	CARD	Advance Amount	80,000.00
4	9/27/2024	MMH/MH/RECH202403779	CARD	Advance Amount	40,000.00
5	10/3/2024	MMH/MH/REDH202421735	CARD	Collected Amount	124,258.00