

IN PATIENT SUMMARY BILL

UHID : MH56410

IP No : IP2024000183

Patient name : Mrs.POORNIMA G

Age : 41 Y 2 M 13 D/Female

Consultant Name : Dr.ARUN RAMANAN

Bill No : MMH/MH/IP202400175

Bill Date : 25/01/2024

DOA : 25/1/2024 9:48AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 2,100.00
3	NURSING CHARGE	₹ 375.00
4	PROFESSIONAL FEES	₹ 5,000.00
Gross Amount		₹ 7,825.00
Net Payable		₹ 7,825.00
Advance Amount		₹ 7,000.00
Received Amount		₹ 825.00

Received Amount in Words :

KARTHIK C  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	25/01/2024	MMH/MH/RECH2024002'	CARD	Advance Amount	7,000.00
2	25/01/2024	MMH/MH/REDH2024018	CARD	Collected Amount	825.00