

IN PATIENT SUMMARY BILL

UHID : MHI202381341

IP No : IPH2024000324

Patient name : Mr.KOTTEESWARAN K

Age : 73 Y 9 M 28 D/Male

Bill No : MMH/HM/IPH202400318

Bill Date : 12/02/2024

DOA : 12/2/2024 11:09AM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.G. GNANAVELU

S.No	Description	Amount	
1	CARDIOLOGY PACKAGE-HEART	₹	8,494.00
2	PHARMACY CHARGE	₹	7,506.00
Gross Amount		₹	16,000.00
Net Payable		₹	16,000.00
Advance Amount		₹	16,000.00
Received Amount		₹	0.00

Received Amount in Words : Sixteen Thousand Only

AKASH

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	12/02/2024	MMH/HM/RECAP2024003	CASH	Advance Amount	16,000.00