

IN PATIENT SUMMARY BILL

UHID	:	MHI202381432	Bill No	:	MMH/HM/IPH00621
IP No	:	IPH2023002605	Bill Date	:	27/12/2023
Patient name	:	Mrs.MARGRAT RAJINI P	DOA	:	27/12/2023 8:38AM
Age	:	63 Y 3 M 26 D/Female	DOD	:	
			Entity Type	:	CASH
			Entity Name	:	CASH
Consultant Name	:	Dr.K.JAISHANKAR			

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 10,756.00
2	PHARMACY CHARGE	₹ 5,244.00
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

SANTHOSH
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	27/12/2023	MMH/HM/RECAP00684	CASH	Advance Amount	16,000.00