

IN PATIENT SUMMARY BILL

UHID : MMH202372338
IP No : IP2023002789
Patient name : Mr.GANESH KAR
Age : 53 Y 11 M 19 D/Male

Bill No : MMH/MH/IP00235
Bill Date : 27/12/2023
DOA : 23/12/2023 12:49PM
DOD :
Entity Type : CASH
Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 4,400.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 2,800.00
4	EQUIPMENT	₹ 1,500.00
5	LABORATORY	₹ 10,385.00
6	NURSING CHARGE	₹ 3,000.00
7	PHARMACY CHARGE	₹ 7,397.00
8	PROFESSIONAL TEAM FEES	₹ 8,500.00
9	RADIOLOGY	₹ 9,000.00
Gross Amount		₹ 47,332.00
Net Payable		₹ 47,332.00
Advance Amount		₹ 27,332.00
Received Amount		₹ 20,000.00

Received Amount in Words : Forty-Seven Thousand Three Hundred
Thirty-Two Only

KARTHIK C
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	26/12/2023	MMH/MH/RECH00487	UPI	Advance Amount	10,000.00
2	27/12/2023	MMH/MH/RECH00492	CASH	Advance Amount	12.00
3	27/12/2023	MMH/MH/RECH00493	UPI	Advance Amount	17,320.00
4	27/12/2023	MMH/MH/REDH02506	UPI	Collected Amount	20,000.00