IN PATIENT SUMMARY BILL

: MHI202381445 Bill No : MMH/HM/IPH00645 UHID

: 29/12/2023 : IPH2023002617 IP No Bill Date

· Mrs.VALARMATHI K : 28/12/2023 10:11AM DOA Patient name

: 58 Y 7 M 3 D/Female DOD Age

Entity Type : Corporate Entity Name : CGHS

: CGHS

Consultant Name : Dr.G. GNANAVELU

S.No	Description			Amount
1	CARDIOLOGY PACKAGE-HEART		₹	7,590.00
2	PHARMACY CHARGE		₹	4,313.00
		Gross Amount	₹	11,903.00
		Net Payable	₹	11,903.00
		Advance Amount	₹	11,903.00
		Received Amount	₹	0.00

CGHS PATEINT FOR EMP Remarks:

IYAPPAN R Received Amount in Words : Eleven Thousand Nine Hundred Three Only

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	28/12/2023	MMH/HM/RECAP00702	CARD	Advance Amount	11,903.00