

**IN PATIENT SUMMARY BILL**

UHID : MHI202381455

IP No : IPH202302582

Patient name : Mr.SHANMUGARAJ K

Age : 57 Y 5 M 9 D/Male

Bill No : MMH/HM/IPH00585

Bill Date : 23/12/2023

DOA : 23/12/2023 10:25AM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.G. GNANAVELU

S.No	Description	Amount	
1	CARDIOLOGY PACKAGE-HEART	₹	9,882.00
2	PHARMACY CHARGE	₹	6,118.00
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	23/12/2023	MMH/HM/RECAP00640	CARD	Advance Amount	10,000.00
2	23/12/2023	MMH/HM/RECAP00641	UPI	Advance Amount	6,000.00