

IN PATIENT DETAILED BILL

Patient Name	: Mr.S.BULLIBABU	Patient Id	: MHK202400650
Patient Type	: IP	Bill No	: MMH/KM/IPK202400005
Gender	: Male	IP No	: IPK2024000001
Age	: 56 Y 0 M 1 D	Ward/Bed	: GENERAL WARD / 108 - A
Doctor Name	: Dr.KRISHNA PRITHVI	DOA	: 03/01/2024 7:03PM
Speciality	: PULMONOLOGIST	DOD	:
Entity Type	: CASH	Bill Date	: 04/01/2024
Payer	: CASH		

S.No	Date & Time	Particulars	QTY	Unit Rate		Amount
BED CHARGES						
1	01/04/2024	BED CHARGES - GENERAL WARD	0.50 days	₹	2,000.00 ₹	1,000.00
CASUALTY						
2	01/04/2024	CONSULTATION	1.00	₹	500.00 ₹	500.00

Gross Amount	₹	1,500.00
Net Payable	₹	1,500.00
Advance Amount	₹	5,000.00
Received Amount	₹	0.00
Refund Amount	₹	3,500.00

Remarks : DISCHARGE AGAINST

Received Amount In Words : Five Thousand Only

RAYAPUREDDI
VINODKUMAR
Authorized Signataure

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	03/01/2024	MMH/KM/RECAP20240000	UPI	Advance Amount	5,000.00