IN PATIENT SUMMARY BILL

UHID	:	MHI202481759	Bill No	:	MMH/HM/IPH202400091
IP No	:	IPH2024000096	Bill Date	:	11/01/2024
Patient name	:	Mrs.BANUMATHY.E	DOA	:	11/1/2024 11:31AM
Age	:	77 Y 1 M 16 D/Female	DOD	:	
			Entity Type	:	CASH
			Entity Name	:	CASH
Consultant Name	:	Dr.G. GNANAVELU			

S.No	Description		Amount
1	CARDIOLOGY PACKAGE-HEART	₹	9,540.00
2	PHARMACY CHARGE	₹	6,460.00
	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

IYAPPAN R
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	11/01/2024	MMH/HM/RECAP2024001	CARD	Advance Amount	16,000.00