

IN PATIENT SUMMARY BILL

UHID : MHC202402066

IP No : IPC2024000112

Patient name : Master.SANTHOSH

Age : 1 Y 0 M 0 D/Male

Consultant Name : Dr.ARTHI

Bill No : MMH/CM/IP202400099

Bill Date : 13/01/2024

DOA : 13/1/2024 7:17PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 250.00
2	BED CHARGES	₹ 600.00
3	INFECTION CONTROL	₹ 200.00
4	MEDICAL RECORD CHARGE	₹ 200.00
5	NURSING CHARGE	₹ 250.00
6	OPERATION THEATRE CHARGES	₹ 1,000.00
Gross Amount		₹ 2,500.00
Net Payable		₹ 2,500.00
Received Amount		₹ 2,500.00

Received Amount in Words : Two Thousand Five Hundred Only

SASI KUMAR.K

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	13/01/2024	MMH/CM/RECB202402	CASH	Collected Amount	2,500.00