

IN PATIENT SUMMARY BILL

UHID : MMH202473266

IP No : IPH2024000181

Patient name : Mrs.BHANUMATHI E

Age : 66 Y 3 M 12 D/Female

Bill No : MMH/HM/IPH202400186

Bill Date : 27/01/2024

DOA : 27/1/2024 9:47AM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.K.JAISHANKAR

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 9,820.00
2	PHARMACY CHARGE	₹ 6,180.00
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

PRAVEEN KUMAR  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	27/01/2024	MMH/HM/RECAP2024002	CARD	Advance Amount	16,000.00