

IN PATIENT SUMMARY BILL

UHID : MHI202482147

IP No : IPH2024000998

Patient name : Mrs.UMA S

Age : 63 Y 11 M 24 D/Female

Consultant Name : Dr.G. GNANAVELU

Bill No : MMH/HM/IPH202400971

Bill Date : 25/04/2024

DOA : 25/4/2024 10:56AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 10,670.00
2	PHARMACY CHARGE	₹ 5,330.00
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

AKASH

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	25/04/2024	MMH/HM/RECAP2024011	CASH	Advance Amount	16,000.00