

IN PATIENT SUMMARY BILL

UHID : MHI202482237

IP No : IPH2024000295

Patient name : Mr.SHABEER .P

Age : 50 Y 11 M 11 D/Male

Bill No : MMH/HM/IPH202400287

Bill Date : 08/02/2024

DOA : 8/2/2024 10:18AM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.G. GNANAVELU

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 9,264.00
2	PHARMACY CHARGE	₹ 6,736.00
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	08/02/2024	MMH/HM/RECAP2024003	CASH	Advance Amount	16,000.00