## IN PATIENT SUMMARY BILL

UHID : MHI202482325 Bill No : MMH/HM/IPH202400329

IP No : IPH2024000336 Bill Date : 13/02/2024

Patient name : Mr.ELUMALAI .A DOA : 13/2/2024 10:53AM

Age : 71 Y 7 M 6 D/Male DOD

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.G. GNANAVELU

S.No	Description			Amount
1	CARDIOLOGY PACKAGE-HEART		₹	7,376.00
2	PHARMACY CHARGE		₹	8,624.00
		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	13/02/2024	MMH/HM/RECAP2024003	CASH	Advance Amount	16,000.00