IN PATIENT SUMMARY BILL

UHID : MHI202482370 Bill No : MMH/HM/IPH202400344

IP No : IPH2024000362 Bill Date : 15/02/2024

Patient name : Mr.SENTHIL RAJA S DOA : 15/2/2024 10:23AM

Age : 50 Y 11 M 10 D/Male DOD

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.G. GNANAVELU

S.No	Description			Amount
1	CARDIOLOGY PACKAGE-HEART		₹	8,562.00
2	PHARMACY CHARGE		₹	7,438.00
		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	15/02/2024	MMH/HM/RECAP2024003	CASH	Advance Amount	16,000.00