

IN PATIENT SUMMARY BILL

UHID	: MHI202482610	Bill No	: MMH/HM/IPH202400463
IP No	: IPH2024000475	Bill Date	: 28/02/2024
Patient name	: Mrs.SUGANTHI	DOA	: 28/2/2024 10:33AM
Age	: 40 Y 8 M 18 D/Female	DOD	:
		Entity Type	: CASH
		Entity Name	: CASH
Consultant Name	: Dr.G. GNANAVELU		

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 9,778.00
2	PHARMACY CHARGE	₹ 6,222.00
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	28/02/2024	MMH/HM/RECAP2024005	CASH	Advance Amount	16,000.00