

IN PATIENT SUMMARY BILL

UHID : MMH202474236

IP No : IP2024000474

Patient name : Mr.NARENDRA KUMAR

Age : 33 Y 0 M 2 D/Male

Consultant Name : Dr.SREENIVAS.U.M

Bill No : MMH/MH/IP202400480

Bill Date : 03/03/2024

DOA : 2/3/2024 12:00AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 4,125.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,125.00
4	LABORATORY	₹ 6,326.00
5	NURSING CHARGE	₹ 1,200.00
6	PROFESSIONAL FEES	₹ 1,500.00
7	RADIOLOGY	₹ 7,880.00
Gross Amount		₹ 22,506.00
Net Payable		₹ 22,506.00
Advance Amount		₹ 10,000.00
Received Amount		₹ 12,506.00

Received Amount in Words : Twenty-Two Thousand Five Hundred Six Only

DINESH
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	02/03/2024	MMH/MH/RECH2024007	CASH	Advance Amount	10,000.00
2	03/03/2024	MMH/MH/REDH2024047	CASH	Collected Amount	12,506.00