

IN PATIENT SUMMARY BILL

UHID : MHI202482725

IP No : IPH2024000513

Patient name : Mr.MURUGAVEL S

Age : 49 Y 2 M 4 D/Male

Consultant Name : Dr.G. GNANAVELU

Bill No : MMH/HM/IPH202400504

Bill Date : 05/03/2024

DOA : 5/3/2024 10:50AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 8,809.00
2	PHARMACY CHARGE	₹ 7,191.00
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	05/03/2024	MMH/HM/RECAP2024005	CARD	Advance Amount	16,000.00