

IN PATIENT SUMMARY BILL

UHID : MHI202482861

IP No : IPH2024000600

Patient name : Mrs.MANIKAMMAL

Age : 69 Y 2 M 12 D/Female

Bill No : MMH/HM/IPH202400585

Bill Date : 13/03/2024

DOA : 13/3/2024 11:17AM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.G. GNANAVELU

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 8,435.00
2	PHARMACY CHARGE	₹ 7,565.00
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	13/03/2024	MMH/HM/RECAP2024006	CASH	Advance Amount	16,000.00