

IN PATIENT SUMMARY BILL

UHID : MHI202482975

IP No : IPH2024000654

Patient name : Mrs.KUMARI N

Age : 67 Y 9 M 9 D/Female

Consultant Name : Dr.G. GNANAVELU

Bill No : MMH/HM/IPH202400628

Bill Date : 18/03/2024

DOA : 18/3/2024 12:48PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 9,238.00
2	PHARMACY CHARGE	₹ 6,762.00
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	18/03/2024	MMH/HM/RECAP2024007	CASH	Advance Amount	16,000.00