

IN PATIENT SUMMARY BILL

UHID : MHI202483103

IP No : IPH2024000729

Patient name : Mrs.SELVI

Age : 54 Y 0 M 0 D/Female

Consultant Name : Dr.NARENDRAN M

Bill No : MMH/HM/IPH202400708

Bill Date : 27/03/2024

DOA : 27/3/2024 11:15AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 6,941.00
2	PHARMACY CHARGE	₹ 9,059.00
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	27/03/2024	MMH/HM/RECAP2024008	UPI	Advance Amount	16,000.00