

IN PATIENT SUMMARY BILL

UHID : MHI202483502

IP No : IPH2024001009

Patient name : Mrs.VALARMADHI

Age : 49 Y 3 M 25 D/Female

Bill No : MMH/HM/IPH202400981

Bill Date : 26/04/2024

DOA : 26/4/2024 11:23AM

DOD :

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.G. GNANAVELU

S.No	Description	Amount
1	CARDIOLOGY PACKAGE-HEART	₹ 10,155.00
2	PHARMACY CHARGE	₹ 5,845.00
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	26/04/2024	MMH/HM/RECAP2024011	CASH	Advance Amount	16,000.00