IN PATIENT SUMMARY BILL

: MMH/HM/IPH202400974 UHID : MHI202483591 Bill No

: 25/04/2024 : IPH2024000996 IP No Bill Date

: Dr.ARPUTHARAJ J : 25/4/2024 10:38AM DOA Patient name

: 58 Y 9 M 28 D/Male DOD Age

Entity Type : CASH Entity Name : CASH

: CASH

Consultant Name · Dr.G. GNANAVELU

S.No	Description			Amount
1	CARDIOLOGY PACKAGE-HEART		₹	9,369.00
2	PHARMACY CHARGE		₹	6,631.00
		Gross Amount	₹	16,000.00
		Net Payable	₹	16,000.00
		Advance Amount	₹	16,000.00
		Received Amount	₹	0.00

: Sixteen Thousand Only PRAVEEN **Received Amount in Words Authorised Signature**

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	25/04/2024	MMH/HM/RECAP2024011	CASH	Advance Amount	16,000.00