

IN PATIENT SUMMARY BILL

UHID : MMH202477209

IP No : IP2024001304

Patient name : Mrs.SUREKHA G

Age : 66 Y 9 M 1 D/Female

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202401272

Bill Date : 14/06/2024

DOA : 10/6/2024 6:29PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 16,800.00
3	DIET CHARGES	₹ 4,150.00
4	DUTY MEDICAL OFFICER CHARGE	₹ 3,000.00
5	LABORATORY	₹ 1,872.00
6	NURSING CHARGE	₹ 3,200.00
7	PROFESSIONAL TEAM FEES	₹ 7,500.00
Gross Amount		₹ 36,872.00
Net Payable		₹ 36,872.00
Advance Amount		₹ 6,000.00
Received Amount		₹ 30,872.00

Received Amount in Words : Thirty-Six Thousand Eight Hundred Seventy-Two Only

KARTHICK.S
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/14/2024	MMH/MH/RECH202402186	CHEQUE	Advance Amount	1,000.00
2	6/14/2024	MMH/MH/RECH202402187	CARD	Advance Amount	5,000.00
3	6/14/2024	MMH/MH/REDH202412870	CARD	Collected Amount	30,872.00