

IN PATIENT SUMMARY BILL

UHID : MMH202477385

IP No : IP2024001356

Patient name : Mr.SELVARAJ V

Age : 77 Y 10 M 2 D/Male

Consultant Name : Dr.T.PALANIAPPAN

Bill No : MMH/MH/IP202401286

Bill Date : 18/06/2024

DOA : 17/6/2024 7:34PM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 350.00
2	BED CHARGES	₹ 550.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 375.00
4	NURSING CHARGE	₹ 400.00
5	PROFESSIONAL FEES	₹ 15,000.00
Gross Amount		₹ 16,675.00
Net Payable		₹ 16,675.00
Advance Amount		₹ 3,000.00
Received Amount		₹ 13,675.00

Received Amount in Words : Sixteen Thousand Six Hundred Seventy-Five Only

SRINIVASAN
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/17/2024	MMH/MH/RECH202402222	UPI	Advance Amount	3,000.00
2	6/18/2024	MMH/MH/REDH202413061	UPI	Collected Amount	13,675.00