IN PATIENT SUMMARY BILL

UHID : MMH202477571 Bill No : MMH/MH/IP202401234

: IP2024001272 : 09/06/2024 IP No Bill Date

Patient name : Mr.GUNASEKAR : 5/6/2024 12:18PM DOA

DOD : 62 Y 11 M 8 D/Male Age

: CASH Entity Type

: CASH Entity Name

Consultant Name : Dr.VISHNUBABU.G

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	350.00
2	BED CHARGES		₹	11,000.00
3	DIET CHARGES		₹	2,500.00
4	DUTY MEDICAL OFFICER CHARGE		₹	3,000.00
5	GENERAL PROCEDURE		₹	1,500.00
6	LABORATORY		₹	10,216.00
7	NURSING CHARGE		₹	3,200.00
8	OPERATION THEATRE CHARGES		₹	8,350.00
9	PHYSIOTHERAPY		₹	1,200.00
10	PROFESSIONAL TEAM FEES		₹	19,000.00
11	RADIOLOGY		₹	400.00
		Gross Amount	₹	60,716.00
		Net Payable	₹	60,716.00
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Advance Amount ₹ 20,000.00

₹ **Received Amount** 40,716.00

Received Amount in Words : Sixty Thousand Seven Hundred Sixteen Only SATHISH KUMAR.S

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/5/2024	MMH/MH/RECH202402076	CASH	Advance Amount	20,000.00
2	6/9/2024	MMH/MH/REDH202412366	CHEQUE	Collected Amount	1,447.00
3	6/9/2024	MMH/MH/REDH202412367	CASH	Collected Amount	20,000.00
4	6/9/2024	MMH/MH/REDH202412368	UPI	Collected Amount	19,269.00