IN PATIENT SUMMARY BILL

UHID : MMH202478618 Bill No : MMH/MH/IP202401403

: IP2024001447 : 30/06/2024 IP No Bill Date

Patient name : Mrs.JUTHIKA SARKAR : 28/6/2024 8:19AM DOA

DOD : 57 Y 5 M 29 D/Female Age

: CASH Entity Type

: CASH Entity Name

Consultant Name : Dr.BALASUBRAMANIAM

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	350.00
2	BED CHARGES		₹	2,200.00
3	BLOOD COMPONENTS		₹	2,550.00
4	DIET CHARGES		₹	1,500.00
5	DUTY MEDICAL OFFICER CHARGE		₹	1,500.00
6	GENERAL PROCEDURE		₹	450.00
7	INJECTION CHARGES		₹	200.00
8	LABORATORY		₹	809.00
9	NURSING CHARGE		₹	1,600.00
10	OPERATION THEATRE CHARGES		₹	20,050.00
11	OTHER ADDITION		₹	10,000.00
12	PHARMACY CHARGE		₹	14,895.00
13	PROFESSIONAL TEAM FEES		₹	43,896.00
		Gross Amount	₹	100,000.00
		Net Payable	₹	100,000.00

₹ 50,000.00 **Advance Amount** ₹ 50,000.00 **Received Amount**

: One Lakh Zero Only SATHISH KUMAR.S **Received Amount in Words**

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	6/29/2024	MMH/MH/RECH202402412	CARD	Advance Amount	20,000.00
2	6/29/2024	MMH/MH/RECH202402424	CARD	Advance Amount	30,000.00
3	6/30/2024	MMH/MH/REDH202414020	CARD	Collected Amount	10,000.00
4	6/30/2024	MMH/MH/REDH202414021	CASH	Collected Amount	40,000.00