IN PATIENT SUMMARY BILL

UHID : MMH202478785 Bill No : MMH/MH/IP202401550

IP No : IP2024001476 Bill Date : 19/07/2024

Patient name : Mr.RIYAZULLAH.G DOA : 2/7/2024 2:30AM Age : 55 Y 6 M 19 D/Male DOD :

Entity Type : CASH Entity Name : CASH

Consultant Name : Dr.VASUDEVAN R

Desc	Description			Amount
\DN	ADMINISTRATION CHARGES		₹	350.00
BED	BED CHARGES		₹	27,775.00
DIE'	DIET CHARGES		₹	3,500.00
DUT	DUTY MEDICAL OFFICER CHARGE		₹	4,875.00
EQU	EQUIPMENT		₹	1,660.00
GEN	GENERAL PROCEDURE		₹	2,700.00
LAE	LABORATORY		₹	21,482.00
NUF	NURSING CHARGE		₹	5,200.00
OPE	OPERATION THEATRE CHARGES		₹	7,000.00
PRO	PROFESSIONAL TEAM FEES		₹	33,000.00
RAI	RADIOLOGY		₹	5,110.00
		Gross Amount	₹	112,652.00
		Net Payable	₹	112,652.00
		Advance Amount	₹	70,000.00

 Advance Amount
 ₹
 70,000.00

 Received Amount
 ₹
 42,652.00

12,0021

: One Lakh Twelve Thousand Six Hundred Fifty-Two Only

KARTHICK.S

Authorised Signature

Payment History

Received Amount in Words

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/2/2024	MMH/MH/RECH202402456	CASH	Advance Amount	10,000.00
2	7/2/2024	MMH/MH/RECH202402468	CASH	Advance Amount	20,000.00
3	7/2/2024	MMH/MH/RECH202402477	CARD	Advance Amount	10,000.00
4	7/6/2024	MMH/MH/RECH202402528	CASH	Advance Amount	30,000.00
5	7/8/2024	MMH/MH/REDH202415770	CHEQUE	Collected Amount	1,366.00
6	7/8/2024	MMH/MH/REDH202415771	CARD	Collected Amount	41,286.00