## IN PATIENT SUMMARY BILL

UHID : MMH202481506 Bill No : MMH/MH/IP202401984

IP No : IP2024002052 Bill Date : 16/09/2024

Patient name : Mr.BOOBALAN C DOA : 15/9/2024 10:58PM

Age : 36 Y 1 M 30 D/Male DOD

Entity Type : CASH

Entity Name : CASH

Consultant Name : Dr.T.PALANIAPPAN

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	350.00
2	BED CHARGES		₹	1,100.00
3	DUTY MEDICAL OFFICER CHARGE		₹	750.00
4	LABORATORY		₹	7,089.00
5	NURSING CHARGE		₹	800.00
6	PROFESSIONAL TEAM FEES		₹	5,000.00
7	RADIOLOGY		₹	5,925.00
		Gross Amount	₹	21,014.00
		Net Payable	₹	21,014.00
		Advance Amount	₹	10,000.00

**Received Amount** 

Received Amount in Words : Twenty-One Thousand Fourteen Only SUDHA

**Authorised Signature** 

₹

11,014.00

## **Payment History**

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/16/2024	MMH/MH/REDH202420359	CHEQUE	Collected Amount	2,009.00
2	9/16/2024	MMH/MH/RECH202403596	CASH	Advance Amount	10,000.00
3	9/16/2024	MMH/MH/REDH202420360	CASH	Collected Amount	9,005.00