## IN PATIENT SUMMARY BILL

UHID : MMH202482231 Bill No : MMH/MH/IP202402145

: IP2024002208 : 06/10/2024 IP No Bill Date

: Child.PREETI GHOSH Patient name : 4/10/2024 9:42AM DOA

: 3 Y 10 M 10 D/Female DOD Age

: CASH Entity Type

: CASH Entity Name

Consultant Name : Dr.PASUPATHY

S.No	Description			Amount
1	ADMINISTRATION CHARGES		₹	350.00
2	BED CHARGES		₹	2,200.00
3	DIET CHARGES		₹	1,000.00
4	DUTY MEDICAL OFFICER CHARGE		₹	1,500.00
5	INJECTION CHARGES		₹	200.00
6	NURSING CHARGE		₹	1,600.00
7	OPERATION THEATRE CHARGES		₹	21,000.00
8	PHARMACY CHARGE		₹	67,655.00
9	PROCEDURE CHARGES		₹	500.00
10	PROFESSIONAL TEAM FEES		₹	46,995.00
		Gross Amount	₹	143,000.00
		Net Payable	₹	143,000.00
		Advance Amount	₹	67 500 00

**Advance Amount** 67,500.00 ₹ 75,500.00 **Received Amount** 

: One Lakh Forty-Three Thousand 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	10/5/2024	MMH/MH/RECH202403912	UPI	Advance Amount	5,000.00
2	10/5/2024	MMH/MH/RECH202403913	UPI	Advance Amount	2,500.00
3	10/6/2024	MMH/MH/RECH202403924	UPI	Advance Amount	60,000.00
4	10/6/2024	MMH/MH/REDH202421960	UPI	Collected Amount	40,000.00
5	10/6/2024	MMH/MH/REDH202421961	CASH	Collected Amount	35,500.00