

Out Patient Bill

Patient Name : Mr.DIALYSIS MACHINE
Patient Id : MMH202372309
Age/Gender : 0 Y 3 M 13 D/Male
Phone Number : 9345930819
Doctor Name : Dr.MEDWAY HOSPITAL
Visit Date : 03/04/2024 11:26:19AM
Speciality : GENERAL MEDICINE

Bill No : MMH/MH/DG202400920
Bill Date : 03/04/2024 11:26:39AM
Visit Report Id : MMH202372309-V008
Payment Mode :
Entity Type : CASH
Entity Name : CASH

S.No	Description	Qty	Unit Rate	Discount	Amount
1	ELECTROLYTES	3.00	₹750.00	₹0.00	₹2,250.00

Total Amount : ₹2,250.00
Discount Amount : ₹2,250.00
Net Amount : ₹ 0.00
Amount Received : ₹ 0.00

Received Amount : Zero Only
in Words

KARTHIK C
Authorised Signature