

IN PATIENT SUMMARY BILL

UHID : MKB202403958

IP No : IPKB2024000977

Patient name : Baby.FAHEEM

Age : 0 Y 11 M 20 D/Male

Consultant Name : Dr.K.SAMBASIVAM

Bill No : MMH/MK/IP202400972

Bill Date : 31/07/2024

DOA : 28/7/2024 10:30AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 150.00
2	BED CHARGES	₹ 7,000.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,600.00
4	LABORATORY	₹ 1,504.00
5	MEDICAL RECORD CHARGE	₹ 200.00
6	NURSING CHARGE	₹ 1,800.00
Gross Amount		₹ 12,254.00
Discount Amount		₹ 1,000.00
Net Payable		₹ 11,254.00
Advance Amount		₹ 10,000.00
Received Amount		₹ 1,254.00

Received Amount in Words : Eleven Thousand Two Hundred Fifty-Four Only

MANIMEGALAI.T
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	7/29/2024	MMH/MK/RECH202402377	CASH	Advance Amount	4,000.00
2	7/30/2024	MMH/MK/RECH202402394	CASH	Advance Amount	2,000.00
3	7/31/2024	MMH/MK/RECH202402411	CASH	Advance Amount	4,000.00
4	7/31/2024	MMH/MK/REDH202406795	CASH	Collected Amount	1,254.00