

IN PATIENT SUMMARY BILL

UHID : MKB202405225

IP No : IPKB2024001232

Patient name : Mrs.SIVARANJANI.V

Age : 29 Y 0 M 1 D/Female

Consultant Name : Dr.V. SIVASAKTHI

Bill No : MMH/MK/IP202401205

Bill Date : 25/09/2024

DOA : 24/9/2024 8:50AM

DOD :

Entity Type : CASH

Entity Name : CASH

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 150.00
2	BED CHARGES	₹ 1,000.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 400.00
4	INJECTION CHARGES	₹ 1,050.00
5	LABORATORY	₹ 1,750.00
6	MEDICAL RECORD CHARGE	₹ 200.00
7	NURSING CHARGE	₹ 450.00
8	OPERATION THEATRE CHARGES	₹ 5,000.00
9	PROFESSIONAL TEAM FEES	₹ 3,000.00
Gross Amount		₹ 13,000.00
Discount Amount		₹ 2,000.00
Net Payable		₹ 11,000.00
Advance Amount		₹ 10,000.00
Received Amount		₹ 1,000.00

Received Amount in Words : Eleven Thousand Only

KRISHNAN  
Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	9/25/2024	MMH/MK/RECH202403095	CASH	Advance Amount	10,000.00
2	9/25/2024	MMH/MK/REDH202408483	CASH	Collected Amount	1,000.00