

## IN PATIENT SUMMARY BILL

UHID : MKB202405225 Bill No : MMH/MK/IP202401205  
IP No : IPKB2024001232 Bill Date : 25/09/2024  
Patient name : Mrs.SIVARANJANI.V DOA : 24/9/2024 8:50AM  
Age : 29 Y 0 M 1 D/Female DOD :  
Entity Type : CASH  
Entity Name : CASH

Consultant Name : Dr.V. SIVASAKTHI

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
	<b>Gross Amount</b>	₹ 13,000.00
	<b>Discount Amount</b>	₹ 2,000.00
	<b>Net Payable</b>	₹ 11,000.00
	<b>Advance Amount</b>	₹ 10,000.00
	<b>Received Amount</b>	₹ 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