

IN PATIENT SUMMARY BILL

UHID : MKB202405426 Bill No : MMH/MK/IP202401276
IP No : IPKB2024001286 Bill Date : 11/10/2024
Patient name : Mrs.SURYA.D DOA : 7/10/2024 10:30AM
Age : 32 Y 0 M 4 D/Female DOD :
Entity Type : CASH
Entity Name : CASH
Consultant Name : Dr.S.ANAND

S.No	Description	Amount
1	ADMINISTRATION CHARGES	₹ 150.00
2	BED CHARGES	₹ 8,000.00
3	DUTY MEDICAL OFFICER CHARGE	₹ 1,600.00
4	EQUIPMENT	₹ 3,250.00
5	LABORATORY	₹ 4,750.00
6	MEDICAL RECORD CHARGE	₹ 200.00
7	NURSING CHARGE	₹ 1,800.00
8	OPERATION THEATRE CHARGES	₹ 10,050.00
9	PROFESSIONAL TEAM FEES	₹ 35,000.00
10	RADIOLOGY	₹ 200.00
	Gross Amount	₹ 65,000.00
	Discount Amount	₹ 3,000.00
	Net Payable	₹ 62,000.00
	Advance Amount	₹ 30,000.00
	Received Amount	₹ 32,000.00

Received Amount in Words : Sixty-Two Thousand Only

DHIVYA.P

Authorised Signature

Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1	10/11/2024	MMH/MK/REDH202408891	UPI	Collected Amount	17,000.00
2	10/7/2024	MMH/MK/RECH202403206	CASH	Advance Amount	5,000.00
3	10/7/2024	MMH/MK/RECH202403208	CASH	Advance Amount	25,000.00
4	10/11/2024	MMH/MK/REDH202408892	CASH	Collected Amount	15,000.00