

### IN PATIENT SUMMARY BILL

UHID : MHI202484966      Bill No : MMH/HM/IPH202401797  
 IP No : IPH2024001790      Bill Date : 08/08/2024  
 Patient name : Mr.SYED IBRAHIM (CM SCHEME)      DOA : 3/8/2024 11:10AM  
 Age : 38 Y 2 M 12 D/Male      DOD :  
 Entity Type : Insurance  
 Entity Name : CMCHIS INSURANCE  
 Consultant Name : Dr.RAJESH.V

S.No	Description	Amount
1	BLOOD COMPONENTS	₹ 7,150.00
2	LABORATORY	₹ 21,586.00
3	PHARMACY CHARGE	₹ 139,728.00
4	RADIOLOGY	₹ 4,440.00
	<b>Gross Amount</b>	₹ 172,904.00
	<b>Discount Amount</b>	₹ 75,404.00
	<b>Net Payable</b>	₹ 97,500.00
	<b>Received Amount</b>	₹ 0.00

Received Amount in Words : Zero Only      NITHESVAR R  
 Authorised Signature

#### Payment History

S.No	Receipt Date	Receipt Code	Payment Mode	Trans. Type	Received Amount
1					