

## **TAX INVOICE**



TO:

MRN/NRIC

CASE NO

ADMISSION

: 14.10.2019

06:00

DISCHARGE LOCATION

: 22.10.2019 11:13

**INVOICE DATE** 

: NW41 N04109 42

TYPE OF SUPPLY

: 03.11.2019

: CASH/CREDIT

GST REG NO

: M2-0069889-4

PATIENT NAME:

PLEASE PAY UPON RECEIPT OF THIS ADVICE

SERVICES		AMOUNT BEFORE GOVT SUBSIDY	AMT PAYABLE (\$)
Room Charge Class C	( 8 DAY(s) )	1,800.00	728.00
Daily Treatment Fee Class C	(8 DAY(s))	1,080.00	440.00
Consumables		71.10	51.88
Doctors' Fees		60.00	0.00
INVESTIGATIONS Laboratory Specialised MEDICATIONS		1,564.70 90.00	789.51 67.50
Non Standard Standard		1,352.22 101.75	1,352.22 83.84
TREATMENT SERVICES Assessment & Counselling Other Treatment Services Ward/ Clinic / Other Procedure	es	140.00 53.00 3,288.80	91.00 50.40 435.00
Non-Treatment Services		100.00	100.00
Total Charges Government Subsidy		9,701.57 5,512.22-	
Amount Payable			4,189.35
A&E Amount Transferred			121.00
Total Amount Payable			4,310.35

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IMPORTANT NOTE: Any party who is under a contractual obligation to reimburse the medical expenses shown on the bill, is required to refund to Medisave and MediShield Life OR the Integrated Shield Plan. (Please refer overleaf for information on reimbursement to Medisave/MediShield Life/Integrated Shield Plan.)