

[2 1 OCT 2020

CL Date

: 21 October 2020

Letter No.

: Siloam Hospitals Bangka - 100420201000112B

Subject

: Medical Services Invoices for IN/OUT PATIENT

ALTA MARITIM INDONESIA, PT

JL.RAYA TANJUNG KALIAN, PELABUHAN ASDP MUNTOK, BANGKA BARAT

To: Claim Dept

Attached please find the original bills and detailed cost for patient hospitalization.

Please ensure that the payment of this outstanding amount is made within 0 days of the date of this invoice to:

Due Date

: 23 October 2020

Beneficiary

: PT MEGA BUANA BHAKTI

No. Account

: 5551155542

Bank

: BNI CABANG BUMI SERPONG DAMAI

Amount

: Rp 16,600,000

Should you have made the payment, please fax the transfer receipt and details of payment to:

Accounting & Finance Department

Fax: (+62-717) 9190 922 attn. Bonaventura Adi Prabowo Email: bonaventura.prabowo@siloamhospitals.com

If you have any questions regarding the bill, please do not hesitate to contact us at (+62-717) 9190 900 ext 25204/25206 or Fax with:

. Yopy Kristianto / .

Email: Yopy.Kristianto@siloamhospitals.com /

For any further medical clarification please contact

(+62-717) 9190 900 or Fax with:

dr Metta Trisanty (metta.trisanty@siloamhospitals.com)

Thank you for your cooperation.

Sincerely yours,

Andrias Yogo Prastowo

Head Div. Finance and Administration



CL Date

: 21 October 2020

Letter No.

: Siloam Hospitals Bangka – 100420201000112B

No	Bill Date	No. Bill	No. MR	Patient Name	Bill Amount
1	20-10-2020	OIV2010200015	24600	BAYU TRI PRABOWO	1,600,000.00
2	20-10-2020	OIV2010200016	24601	BAHKTIAR	1,600,000.00
3	20-10-2020	OIV2010200017	24599	RISKI WIBOWO	1,600,000.00
4	20-10-2020	OIV2010200018	24598	AMRAN BONE PASAU	1,600,000.00
5	20-10-2020	OIV2010200019	24597	SAMGAR ARTHUR RATUMBANUA	1,600,000.00
6	20-10-2020	OIV2010200020	24606	TAUFIK	1,600,000.00
7	20-10-2020	OIV2010200021	24605	MISBAK	1,600,000.00
8	20-10-2020	OIV2010200022	24604	YONATHAN RAMBA	1,600,000.00
9	20-10-2020	OIV2010200023	24603	ISHAK SUHERMAN	1,600,000.00
10	20-10-2020	OIV2010200024	24602	RUNDI	1,600,000.00

Grand Total	Rp 16,000,000.00
Grand rotal	10,000,000.00

RINCIAN:

PCR

Biaya Transport

Rp. 16.000.000,-

Rp. 600.000,-

Total

Rp. 16.600.000,-





SURAT JAMINAN PEMBAYARAN

Yang bertanda tangan di bawah ini:

Nama

: Syarifah Rugayah

Jabatan

: Kepala Operasional

Alamat Perusahaan : Jln. Raya Tanjung Kalian pelabuahn ASDP Muntok, Bangka Barat

Dengan ini menyatakan bersedia menjadi penjamin atas segala biaya yang timbul untuk kegiatan SWAB/PCR crew kapal TB. ENC Rhayden sebanyak 10 orang yang di lakukan di atas kapal TB. ENC Rhayden di perairan tanjung kalian muntok Bangka barat. Yang mana kami akan menyelesaikan pembayaran paling lambat pada hari rabu pagi tanggal 22 Oktober 2020 dengan total biaya sebesar Rp. 16.600.000,- (enam belas juta enam ratus ribu rupiah). Demikianlah surat pernyataan ini saya buat dengan sebenar-benarnya.

Muntok, 18 Oktober 2020

PT. Alta Maritim Indonesia

Syarifah Rugayah

BAHF678687548

Raya Pelabuhan Gabion Street No.1C Belawan, North Sumatra 20414 Ph. +6261 6945947 Fax. +6261 6941029 email : agency@altamaritim.co.id

INVOICE

Registration No / MR : OPA2010190110 / 00-02-46-00

Invoice No

: 01V2010200015

Name Address

: BAYU TRI PRABOWO : JLN CITARUM NO 3

Invoice Date : 20-0kt-2020 08:55

Registration Date : 19-Okt-2020 14:06

Patient Type

: PAYER

Payer

: ALTA MARITIM INDONESIA, PT

Primary Doctor

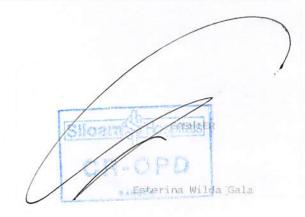
: dr. Topaz Kautsar

No Name	Description	Qty UOH	Amount	Discount	Payer	Patient
CARE PACKAGE			************			
1 PCR BASIC - PERUSAHAAN		1	1.600.000	0	1.600.000	0
		SUB TOTAL :	1.600.000	0	1.600.000	0
		TOTAL :			1.600.000	0
		PAYMENT :			0	0
		BALANCE :			1.600.000	.0

IN WORDS - PATIENT :

Nol rupiah

IN WORDS - PAYER :



INVOICE

Registration No / MR : OPA2010190109 / 00-02-46-01

Invoice No

: 0IV2010200016

Name

: BAHKTIAR

Invoice Date : 20-0kt-2020 08:55

Address

: JLN DIPONEGORO IV RT/RW 003/003

Registration Date: 19-0kt-2020 14:06

Patient Type

Payer

: PAYER

: ALTA MARITIM INDONESIA, PT

Primary Doctor

: dr. Topaz Kautsar

No Name	Description	Qty UOM	Amount	Discount	Payer	Patient
CARE PACKAGE 1 PCR BASIC - PERUSAHAAN		1	1.600.000	0	1,600,000	0
		SUB TOTAL : TOTAL : PAYMENT : BALANCE :		0	1.600.000 1.600.000 0 1.600.000	0 0 0

IN WORDS - PATIENT :

Hol rupiah

IN WORDS - PAYER :



KAB. BANGKA TENGAH, KEPULAUAN BANGKA BELITUNG кымриме рис, рамскагам ваки, JALAN RAYA KOBA RT.014 RW. 005, RUMAH SAKIT SILOAM BANGKA

INADICE

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insitsq 79	V59	inuosi0	invonA	MOU 410	noijainaea0		Ms Name
					PAYER ALTA MARITIM INDONESIA, PT dr. Topaz Kautear	1	Patient Type Payer Primary Docto
95:80 0	0-014-505 0-014-505 11\5010500	ž :	Invoice No Invoice Date Recistration		KAMPUNG TEGAL REJÖ RT/RW 001/002 PISKI WISOWO OPAZO10190111 / 00-02-45-99	:	eeen bbA

SALANCE :



Estering Wilds Gala'

000'009'I

Mol rupiah : IMBIIIVA - SQUOM WI

IM MOBDS - BAYER :

daiqui udin autan mana atuj utak

INVOICE

Registration No / MR : OPA2010190112 / 00-02-45-98

Name : AMRAN BONE POSAU

: JLN WARAKAS V GG T NO 144 B

Description

Patient Type : PAYE

Payer : ALTA MARITIM INDONESIA, PT

Primary Doctor : dr. Topaz Kautsar

Invoice No : 0IV2010200018 Invoice Date : 20-0kt-2020 08:56 Registration Date : 19-0kt-2020 14:06

Qtv NOM	Amount	Discount	Payer	Patient
	1.600.000	0	1.600.000	0
SUB TOTAL :	1.600.000	0	1.600.000	0
TOTAL :			1,600,000	0
PAYMENT :			0	0

BALANCE :

IN WORDS - PATIENT :

CARE PACKAGE

1 PCR BASIC - PERUSAHAAN

Nol rupiah

IN WORDS - PAYER :

Satu juta enam ratus ribu rupiah



1,600,000

INVOICE

Registration No / MR : OPA2010190113 / 00-02-45-97

: SAMGAR ARTHUR RATUMBANUA

Invoice No : DIV2010200019

Name : JLN LETJEN A. MAPPAGDANG NO 128 RT/RW 001/003

Invoice Date : 20-0kt-2020 08:57 Registration Date : 19-Okt-2020 14:06

Address

Patient Type

: ALTA MARITIM INDONESIA, PT

Primary Octor : dr. Topaz Kautsar

No Name	Description	Oty UOH	Amount	Discount	Payer	Patient
CARE PACKAGE 1 PCR BASIC - PERUSAHAAN		!	1.600.000	1)	1,600,000	0
		SUB TOTAL : TOTAL : PAYMENT : BALANCE :	1.600.000	0	1.600.000 1.600.000 0 1.600.000	0 0 0 0

IN WORDS - PATIENT :

Nol rupiah

IN WORDS - PAYER :



INVOICE

Registration No / MR : ORA2010190114 / 00-02-46-06

: 01V2010200020

Name : TAUFTK : 20-0kt-2020 08:57

Address : PURI DEPOK MAS BLOK OD NO 11 A

Registration Date : 19-Okt-2020 14:07

Patient Type

: ALTA MARITIM INDONESIA, PT

: dr. Topaz Kautsar

Ho Hame	Description	Qtv UOH	Amount	Discount	Payer	Patient
CARE PACKAGE				**********		
1 PCR BASIC - PERUSAHAAH		1	1.600.000	0	1.500.000	0
		SUB TOTAL :	1.600.000	0	1.600.000	0
		TOTAL :			1.600.000	0
		PAYHENT :			0	0
		BALANCE :			1.600.000	0

IN WORDS - PATIENT :

Nol rupiah

IN WORDS - PAYER :



INVOICE

Registration No / MR : OPA2010190115 / 00-02-46-05

Invoice No : 0IV2010200021

Name : MISBAK

Invoice Date : 20-0kt-2020 08:57

Address : KOPI LUHUR KOTA CIREBON

Registration Date : 19-0kt-2020 14:07

Patient Type - PAYER

Payer : ALTA MARITIM INDONESIA, PT

Primary Doctor : dr. Topaz Kautsar

No Mame	 Description 	Oty UOH	Amount	Discount	Paver	Patient
CARE PACKAGE 1 PCR BASIC - PERUSAHAAN			1.600.000	0	1.600.000	1
		SUB TOTAL : TOTAL : PAYHENT : BALANCE :	1,600.000	0	1.600.000 1.600.000 0 1.600.000	0 0 0

IN WORDS - PATIENT :

Nol rupiah

IN WORDS - PAYER :



INVOICE

Registration No / MR : OPA2010190117 / 00-02-46-04

Invoice No

: 01V2010200022

: YONATHAN RAMBA Name Address

Invoice Date

: 20-0kt-2020 08:58

: KEBERKAHAN 17 BLOK AD/222 BTP

Registration Date : 19-Okt-2020 14:07

Patient Type

: PAYER

: ALTA MARITIM INDONESIA, PT

Primary Doctor

: dr. Topaz Kautsar

No Name	Description	Dtv 00H	Amount	Discount	Payer	Patient
CARE PACKAGE 1 PCR BASIC - PERUSAHAAN		1	1.600.000	0	1,600,000	0
		SUB TOTAL : TOTAL : PAYMENT : BALANCE :		0	1,600,000 1,600,000 0 1,600,000	0 0 0

IN WORDS - PATIENT :

Nol rupiah

IN WORDS - PAYER :



INVOICE

Registration No / MR : OPA2010190116 / 00-02-46-03

: 0IV2010200023

Name

: ISHAK SUHERMAN

: 20-0kt-2020 08:58

Address

: BTN PONDOK INDAH SOREANG BLOK M/S RT 002 R 009

Registration Date: 19-Okt-2020 14:07

Patient Type

: ALTA MARITIM INDONESIA, PT

: dr. Topaz Kautsar

No Name	Description	Qty UOH	Amount	Discount	Payer	Patient
CARE PACKAGE						
1 PCR BASIC - PERUSAHAAN		1	1.600.000	0	1.600.000	0
		SUB TOTAL :	1,600,000	0	1.600.000	0
		TOTAL :			1.600.000	0
		PAYHENT :			0	0
		BALANCE :			1.600.000	0

IN WORDS - PATIENT :

Mol rupiah

IN WORDS - PAYER :



INVOICE

Registration No / MR : OPA2010190118 / 00-02-46-02

Invoice No : 01V2010200024

Hame : RUND)

Invoice Date : 20-Okt-2020 08:58

Address : PRUPUK UTARA RT 003 RW 004

Registration Date : 19-Okt-2020 14:07

Patient Type : PAYE

Payer : ALTA MARITIM INDONESIA, PT

Primary Doctor : dr. Topaz Kautsar

No Name	Description	Qtv UOH	Amount	Discount	Payer	Patient
CARE PACKAGE 1 PCR BASIC - PERUSAHAAN		1	1.600,000	0	1.600.000	0
		SUB TOTAL : TOTAL : PAYMENT : BALANCE :	1.600.000	0	1.600.000 1.600.000 0 1.600.000	0 0 0

IN WORDS - PATIENT :

Nol rupiah

IN WORDS - PAYER :



INVOICE

Registration No / MR : OPA2010190110 / 00-02-46-00

Invoice No : OIV2010200015

Invoice Date : 20-0kt-2020 08:55

Name : BAYU TRI PRABOWO
Address : JUN CITARUM NO 3

: JUN CITARUM NO 3

Registration Date: 19-Okt-2020 14:06

: PAYER Patient Type

: ALTA MARITIM INDONESIA, PT Payer

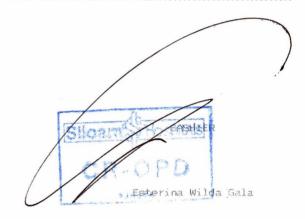
Primary Doctor : dr. Topaz Kautsar

~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~						
No Name	Oescription	Qty: UOH	Amount	Discount	Payer	Patient
CARE PACKAGE 1 PCR BASIC - PERUSAHAAN		1	1.600.000	0	1.600.000	0
		SUB TOTAL : TOTAL : PAYHENT : BALANCE :	1.600.000	0	1.600.000 1.600.000 0 1.600.000	. 0

IN WORDS - PATIENT :

Nol rupiah

IN WORDS - PAYER :



## INVOICE

Registration No / MR : OPA2010190109 / 00-02-46-01

Name : BAHKTIAR

Invoice No : 0IV2010200016
Invoice Date : 20-0kt-2020 08:55

: JLN DIPONEGORO IV RT/RW 003/003

Registration Date : 19-Okt-2020 14:06

Patient Type

Payer

: PAYER

· ALTA MARITIM INDONESIA, PT

Primary Doctor : dr. Topaz Kautsar

No Name	Description	Qty UOM	Amount	Discount	Paver	Patient
CARE PACKAGE 1 PCR BASIC - PERUSAHAAN		1	1.600.000	0	1.600.000	0
		SUB TOTAL : TOTAL : PAYMENT : BALANCE :	1.600.000	0	1,600.000 1.600.000 0 1.600.000	. 0

IN WORDS - PATIENT :

Nol rupiah

IN WORDS - PAYER :

Satu juta enam ratus ribu rupiah



Invoice ini merupakan bukti pembayaran yang sah Printed on 20-Okt-2020 08:56 by Esterina Wilda Gala

#### INVOICE

Registration No / MR : OPA2010190111 / 00-02-45-99

Name : RISKI WISOWO
Address : RISKI WISOWO
KAMPUNG TEGAL REJO RI/RW 001/002

Invoice No : 0IV2010200017
Invoice Date : 20-0kt-2020 08:56

Registration Date : 19-Okt-2020 14:06

Patient Type · PAYER

payer · ALTA MARITIM INDONESIA, PT

Primary Doctor : dr. Topar Kautsar

No Name	Description	Qtv UOM	Amount	Discount	Paver	Patient
CARE PACKAGE 1 PCR BASIC - PERUSAHAAN		1	1,600,000	0	1,600,000	0
		SUB TOTAL : TOTAL : PAYMENT : BALANCE :	1.600.000	0	1.600.000 1.600.000 0 1.600,000	. 0

IN WORDS - PATIENT Nol rupiah

IN WORDS - PAYER :



#### INVOICE

Registration No / MR : OPA2010190112 / 00-02-45-98

Name : AMRON BONE PASAU

Invoice No : 0IV2010200018
Invoice Date : 20-0kt-2020 08:56

Address

: JLN WARAKAS V GG I NO 144 B

Registration Date: 19-Okt-2020 14:06

Patient Type Paver

: PAYER

: ALTA MARITIM INDONESTA, PT

Primary Doctor : dr. Toogr Kautsar

No. Name	Description	NOU VID	Anount	Discount	Payer	Patient
CAME PACKAGE 1 PCR BASIC - PERUSAHAAN	\$P\$	e e e e e e e e e e e e e e e e e e e	1,600.000		1,600.000	0
			1.600,000	0	1.600.000 1.600.000 0 1.600.000	. 0

IN WORDS - PATIENT :

Nol rupiah

IN WORDS - PAYER :

Satu juta enam ratus ribu rupiah



Invoice ini merupakan bukti pembayaran yang sah Printed on 20-Okt-2020 08:56 by Esterina Wilda Gala

#### INVOICE

Registration No / MR : OPA2010190113 / 00-02-45-97

Invoice No : 0IV2010200019

Name : SAMGAR ARTHUR RATUMBANUA

Invoice Date

: 20-0kt-2020 08:57 Registration Date : 19-Okt-2020 14:06

Add reas Patient Type Payer

; JUN LETJEN A. MARPACDANG NO 128 RT/RW 901/003 : PAYER

: ALTA MARITIM INDONESTA, PT

Primary Doctor : dr. Topaz Kautšar

No Mane	Description	aty VOX	Amount	Discount	Payer	Patient
CARE PACKAGE 1 PCR BASTC - PERUSAHAAN		45	1.600.080	0	1.600,000	0
		SUB TOTAL : TOTAL : PAYMENT : BALANCE :		0	1,600,000 1,600,000 0 1,600,000	0

IN WORDS - PATIENT :

Nol rubiah

IN WORDS - PAYER :



INVOICE

Registration No / MR : OPA2010190114 / 00-02-46-06

Imvaice No : 0TV2010200020

Name : TAUTTY

Imagice Date : 20-0kt-2020 08:57

Add ress

- PURT DEPOK MAS BLOK OD NO 11 A

Registration Date : 19-Okt-2020 14:07

Patient Type : Payop Payer

· ALTA MARTTIM INDONESTA, PT

Primary Doctor : dr. Topat Kautear

No Have	n e e e e e e e e e e e e e e e e e e e	Oty UOH	Anount	Discount	Payer	Patient
CARE PACKAGE 1 PCR BASTC - PERUSAHAAN		1	1.600.000	0	1.600.000	0
		SUB FOTAL : TOTAL : PAYMENT : BALANCE :		Û	1.600,000 1,600.000 0 1.600.000	. 0

IN WORDS - PATIENT :

Nol rupiah

IN WORDS - PAYER .

Satu juta enam ratus ribu rupiah



Invoice ini merupakan bukti pembayaran yang sah Printed on 20-Okt-2020 08:57 by Esterina Wilda Gala

#### INVOICE

Registration No / MR : OPA2010190115 / 00-02-48-05

Invoice No : 01V2010200021

. MISBAK

Invoice Date

: 20-0kt-2020 08:57

Address

Payer

. KUBI LAMAK KOLV LIBEBON

Recistration Date : 19-Okt-2020 14:07

Patient Type

PAYER

: ALTA MARITIM INDONESIA. PT

Primary Doctor : dr. Topay Kautsar

Ho Hame	Description	Oty UOH	Amount		Payer	Patient
CARE FACKAGE 1 PCR BASIC - PERUSAHAAN		1	1,600.000	0	1.600.000	0
		SUB TOTAL : TOTAL : PAYMENT : BALANCE :	1,600.000	0	1.600.000 1.600.000 0 1.600.000	. 0

IN WORDS - PATIENT :

Nol rupiah

IN WORDS - PAYER :



#### INVOICE

Registration No / MR : OPA2010190117 / 00-02-46-04

Invoice No

: 0172010200022

Name : YONATHAN BABBA Address : KEBERKAHAN 17 B

Invoice Date

: 20-0kt-2020 08:58

: KEBERKAHAN 17 BLOK AD/222 BTP

Registration Date : 19-Okt-2020 14:07

Patient Type Payer

PAVER

: ALTA MARITIM INCOMESTA. PT

Primary Doctor : dr. Topax Kautsar

	Oescriotion	0tv 110#	Asount	Discount	Paver	Patient
CASE PARKASE 1 PCR BASIC - PERUSAHAAN		1	1.600.000	0	1.600,000	0
		SUB TOTAL : TOTAL : PAYMENT : BALANCE :		0	1,600.000 1,600.000 0 1,600.000	0 0 0

IN WORDS - PATIENT :

Nol rupiah

IN WORDS - PAYER :



#### INVOICE

Registration No / MR : OPA2010190116 / 00-02-46-03

Invoice No

: 0IV2010200023

Name

· ISHAK SUHFRMAN

Invoice Date : 20-0kt-2020 08:58

Add ress

Payer

: BIN PONDOK INDAH SOREANG BLOK M/S RT 002 R 009

Registration Date : 19-Dkt-2020 14:07

Patient Type

: ALTA MARITIM THOONESIA. PT

Primary Doctor : dr. Topax Kautear

No Name	Description	Atv UOH	Amount	Discount	Payer	Patient
CARE PACKAGE 1 PCR BASIC - PERUSAHAAN		1	1.600,000	0	1,600,000	0
		SUB TOTAL : TOTAL : PAYMENT : BALANCE :	[,600,000	0	1.600.000 1.600.000 0 1.600.000	. 0

IN WORDS - PATIENT :

Nol rupiah

IN WORDS - PAYER :



#### INVOICE

Registration No / MR + OPA2010190118 / 00-02-46-02

Invoice No : 0IV/010200024
Invoice Date : 20-0kt-2020 08:58

- BUMDI

Add ress

: PRUPUK UTARA RT 003 RW 004

Registration Date: 19-Okt-2020 14:07

Patient Type

Payer

PAVER

: ALTA MARITIM INDONESIA. PT

Primary Octor : dr. Topaz Kautsar

~						
No Name	Description	Oty UON	Amount	Discount	Payer	Patient
	to define the second of the second or the second or the second of the second of the second of the second of the			**********	**********	
CARE PACKAGE						
1 PCR BASTC - PERUSAHAAN		1	1,600,000	0	1.600,000	0
difference and the later and the later and the later l	particular programmes and an extra mental transfer and an extra contraction of the particular programmes and the particular pr	particle for the last series and the companion of the last series and the last series and the last series and the last series and	of any original contemporary for the last temporary			**************************************
		SUB TOTAL :	1.600.000	0	1,600,000	0
		TOTAL :			1.600,000	. 0
		PAYMENT:			0	0
		BALANCE :			1.600.000	9

IN WORDS - PATIENT :

Nol rupiah

IN WORDS - PAYER :

