



# TAX INVOICE

Admission Date : 22.10.2018

Bill Date : 25.10.2018

ORIGINAL

GST REG NO : M90368910N

GNUZBA2 / FB / 22.10.2018 1546 hrs / Page 1 of 2

SINGAPORE	Tax Invoice Number:6818337074E0010
Patient : dasdasdasd	Bill Ref Number :6818337074E-0010-01
	Tax Invoice Date :22.10.2018 1546 hrs
	Patient NRIC/HRN :S1s4154das
	Visit Date :22.10.2018 1153 hrs
	Visit / Bill Location :GCLHAEC / GCLHAEC / HAE
	Payment Class :PRIVATE
	Type of Supply : Cash/Credit

SERVICE CODE	DESCRIPTION	QUANTITY	AMOUNT(\$\$)
	<b>LABORATORY INVESTIGATIONS</b>	<b>Subtotal</b>	<b>2296.51</b>
HLA03074	HLA DQB TYPING (PCR INT TO HIGH RES)	1	243.93
HF703102	HANDLING FEE	1	18.00
HLA09027	HLA ABCDR TYPING (SBT) FOR LOCAL TRANSPLANT	1	885.98
HF703102	HANDLING FEE	1	18.00
10009606	CREATININE CLEARANCE TEST (CCT)	1	24.90
10010709	GLUCOSE-6-PHOSPHATE DEHYDROGENAS	1	23.30
10010709	GLUCOSE-6-PHOSPHATE DEHYDROGENAS	1	23.30
10019326	VARICELLA-ZOSTER IGG AB	1	43.80
10024120	CYTOMEGALOVIRUS IGM AB	1	54.00
10025806	ANTIBODY TITRATIN SALINE	2	86.40
10030509	VDRL TEST	1	38.70
10033603	HEPATITIS B SURFACE ANTIGEN (HBS)	1	28.70
10033647	HEPATITIS C ANTIBODY	1	50.20
11007650	VNTR ANALYSIS	1	297.80
1Z70213002	ZIKA VIRUS PCR	1	150.00
22002309	HIV SCREEN~	1	37.80
70205046	HEPATITIS B CORE TOTAL AB	1	53.90
70205050	CYTOMEGALOVIRUS IGG AB EIA	1	41.10
70205065	HTLV I/II ANTIBODY	1	103.90
ABO	ABO AND RHO TYPING	2	72.80
	<b>Subtotal Charges</b>		<b>2296.51</b>
	<b>Total Charges Payable</b>		<b>2296.51</b>
AMOUNT PAYABLE BEFORE TAX			2296.51
ADD : 7% GST			160.77
AMOUNT PAYABLE AFTER TAX			2457.28
NET AMOUNT PAYABLE			2457.28
PAYMENT			0.00
AMOUNT DUE FROM			2457.28
*** You are served by ZAWIYAH BINTE ABUDULLAH ***			

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28 NOV 2018

Med Clin Dept



# TAX INVOICE

Receipt Date: 06.10.2018

ORIGINAL

GST REG NO : M90368910N

GBOSSM / FB / 09.10.2018 1010 hrs / Page 1 of 2

<p>SINGAPORE</p> <p>Patient : hfhjergdbfj</p>	<p>Tax Invoice Number: 6818337074E0004</p> <p>Bill Ref Number : 6818337074E-0004-01</p> <p>Tax Invoice Date : 09.10.2018 1010 hrs</p> <p>Patient NRIC/HRN : Ssdasdst</p> <p>Visit Date : 05.10.2018 1035 hrs</p> <p>Visit / Bill Location : GCLHAEC / GMBBO2 / HAE</p> <p>Payment Class : PRIVATE</p> <p>Type of Supply : Cash/Credit</p>
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SERVICE CODE	DESCRIPTION	QUANTITY	AMOUNT(S\$)
	<u>PROFESSIONAL FEES - DOCTOR</u>	Subtotal	100.00
76000205	SNR CONS - REPEAT VISIT	1	100.00
	<u>LABORATORY INVESTIGATIONS</u>	Subtotal	141.50
10004803	ALANINE AMINO TRANSFERASE (ALT)	1	13.90
10004904	ALBUMIN	1	13.90
10006007	ASPARTATE AMINO TRANSFERASE (AST)	1	13.90
10007008	BILIRUBIN TOTAL	1	11.60
10009505	CREATININE	1	12.10
10013106	MAGNESIUM	1	17.40
10014602	PHOSPHATASE ALKALINE	1	16.70
10015401	POTASSIUM	1	11.60
11001003	FULL BLOOD COUNT	1	30.40
	<u>SPECIALISED INVESTIGATIONS</u>	Subtotal	44.30
70221002	ECG 12 LEADS	1	44.30
	<u>DRUGS / PRESCRIPTIONS / INJECTIONS</u>	Subtotal	11.86
CYT02STD	INFUSION SOLN	1	7.00
PHANS2	DiphenhydrAMINE HCL 50MG/ML INJ	1	2.00
PHASTD	HYDROCORTISONE SOD SUCCINATE* 100MG INJ	1	2.76
PHASTD	PARACETAMOL* 500MG TAB	2	0.10
	<u>CLINIC/WARD PROCEDURES</u>	Subtotal	184.20
75201207	FLUSHING OF CENTRAL VENOUS CATHETER	1	60.20
75203119	IV CHEMOTHERAPY INFUSION	1	85.30
76003309	DRESSING I/STO I	1	38.70
	<u>OTHER PROCEDURES</u>	Subtotal	133.60
500HAECB2	FACILITY CHARGE - BED	1	123.00
HAEPREPS	HAEMATOLOGY DRUG PREPARATION FEE (SIMPLE)	1	10.60
	Subtotal Charges		615.46
	Total Charges Payable		615.46
AMOUNT PAYABLE BEFORE TAX			615.46
ADD : 7% GST			43.07
AMOUNT PAYABLE AFTER TAX			658.53
NET AMOUNT PAYABLE			658.53

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658.53

Handwritten notes: "Hand Credit 10/10/18", "65 done", "AW dtd 2/10/18"

**TAX INVOICE**  
(Adjusted)

P 008098  
follow up claim

TO: MDM.  
BLK  
SINGAPORE -

MRN/NRIC : Ssdasdas/A  
CASE NO : 12183607201-00002  
VISIT DATE : 02.04.2018 08:30  
LOCATION : TCT5A  
INVOICE DATE : 16.04.2018  
TYPE OF SUPPLY : CASH/CREDIT  
GST REG NO : M2-0094564-6  
RECEIPT DATE : 20.04.2018  
PLEASE PAY UPON RECEIPT OF THIS INVOICE

PATIENT NAME : dffasasad

Description	Amount(S\$)
<b>Charges Payable</b>	<b>101.20</b>
Total Amount Payable	266.66
<b>ADJUSTMENT:</b> ROUND DOWN FOR AMOUNT PAYABLE BY PATIENT	0.02-
<b>PAYMENT:</b>	
INTEGRATED GREAT EASTERN SUPREMEHEALTH	0.00
MEDISAVE	240.00
	26.14
<b>TOTAL DUE AFTER PAYMENT</b>	<b>0.50</b>
<b>DUE FROM:</b>	
INTEGRATED GREAT EASTERN SUPREMEHEALTH	0.50
MEDISAVE	0.00
	0.00

**FOR INFORMATION**

INTEGRATED GREAT EASTERN SUPREMEHEALTH payout consist of the following:

MEDISHIELD LIFE	239.53
GREAT EASTERN SUPREMEHEALTH ADDITIONAL COVERAGE	0.47

For more information on the payment details, please contact Customer service Hotline Customer Service at 1800 248 2888

MEDISAVE A/C HOLDER	CPF NO	Amt Deducted
	SI A	26.14

Total amount payable after GST is \$285.31.  
Total GST for this bill at 7% is \$18.65 which is absorbed by the Government.

The amount payable by patient has been rounded down to the nearest 5 cents.

THIS TAX INVOICE SUPERSEDES ALL PREVIOUS TAX INVOICES FOR YOUR VISIT ON 02.04.2018.

**TAX INVOICE**  
(Adjusted)

00829  
Follow up claim

TO:

MDM.  
BLK #  
SINGAPORE -

MRN/NRIC : Sdfaasda A  
CASE NO : 12183607201-00021  
VISIT DATE : 11.06.2018 08:30  
LOCATION : TCT5A  
INVOICE DATE : 08.07.2018  
TYPE OF SUPPLY : CASH/CREDIT  
GST REG NO : M2-0094564-6

PATIENT NAME : dsdasdaasd

**BILL RECEIPT DATE : 10.07.2018**  
PLEASE PAY UPON RECEIPT OF THIS INVOICE

Description	Amount(\$)
Total Amount Payable	353.23
<b>ADJUSTMENT:</b> ROUND DOWN FOR AMOUNT PAYABLE BY PATIENT	0.02-
<b>PAYMENT:</b> INTEGRATED GREAT EASTERN SUPREMEHEALTH MEDISAVE	0.00 318.04 20.02
<b>TOTAL DUE AFTER PAYMENT</b>	15.30
<b>DUE FROM:</b> INTEGRATED GREAT EASTERN SUPREMEHEALTH MEDISAVE	15.30 0.00 0.00

**FOR INFORMATION**

INTEGRATED GREAT EASTERN SUPREMEHEALTH payout consist of the following:  
MEDISHIELD LIFE 304.25  
GREAT EASTERN SUPREMEHEALTH ADDITIONAL COVERAGE 13.79

For more information on the payment details, please contact Customer service Hotline Customer Service at 1800 248 2888

MEDISAVE A/C HOLDER	CPF NO	Amt Deducted
	S. A	20.02

Total amount payable after GST is \$378.14.  
Total GST for this bill at 7% is \$24.76 which is absorbed by the Government.

The amount payable by patient has been rounded down to the nearest 5 cents.

THIS TAX INVOICE SUPERSEDES ALL PREVIOUS TAX INVOICES FOR YOUR VISIT ON 11.06.2018.

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27 NOV 2018