

Dispatch Report

Panel: COMMISION FOR UNIVERSITY EDUCATION

Invoice No. : PI/21-22/000000001 Docket No. : 145

S.No. Patient Name	IPD No.	D.O.A	Bill Date	Bill No.	Card/ReferralNo.	Bill Amount P	anel Payble	Panel Paid	Patient Payble	Patient Paid	Claim Amount
1 Baby WELDON METITO		ว1-Jan-0001	18-Feb-2022	OPB/21-22/000000211		16,485.00	15,735.00	11,485.00	750.00	500.00	4,250.00

Total Patient : 1 Total : 4,250.00

Thanks & Regards

Authorized Signatory