Health Care Plus Billing ID:1

Patient Details	
Patient Name:	Alice White
Gender:	Female
Age:	28
Contact:	alice@example.com
NIC:	1234567890
Appointment Date:	8/25/2023
Appointment Time:	10:00:00
Appointment Status:	Scheduled
Room Details	
Room ID:	2
Room Type:	Deluxe
Room Price:	\$1,300.00
Service Details	
Service Description:	X-ray
Service Price:	\$1,500.00
Payment History	
Payment Date: 8/25/2023 12:00:00 AM	Payment Amount: 150.00
Payment Date: 9/7/2023 12:00:00 AM	Payment Amount: 100.00
Additional Charges	
Hospital Service Charge:	\$2,500.00
Doctor's Consultation Fee:	\$2,500.00

Total Bill Details

Bill Status: Paid Total Bill Amount:\$150.00

Bill Issue Date and Time: 09/06/2023 22:49:56