

Patient Name: Atharv
Department: Cardiologyx
Consulting Dr.: Yash

IPD ID: 10313052025

Receipt No.: IPD-10313052025 **Admitted Date:** 13/05/2025

Billing Details

No	Description	Date	Qty	Amount (¹)
1	Room Charge (Type 1)	13/05/2025	2 days	2000
			Discount	0
			Grand Total	2000

Payment Mode	
Cash	
Patient Signature	Hospital Authority