



Patient Name: Sameer
Department: Cardiology
Consulting Dr.: Yash

IPD ID: 7709052025
Receipt No.: IPD-7709052025
Admitted Date: 09/05/2025

Billing Details

No	Description	Date	Qty	Amount (')
1	Room Charge (Type 1)	09/05/2025	1 day	1000
2	HGT	09/05/2025	1	1000
Discount				0
Grand Total				2000

Payment Mode

Cash

Patient Signature

Hospital Authority