

Patient Name: Rohit Linge Department: Cardiologyxcv Consulting Dr.: Yash **IPD ID:** 7809052025

**Receipt No.:** IPD-7809052025 **Admitted Date:** 09/05/2025

## **Billing Details**

No	Description	Date	Qty	Amount (¹)
1	Room Charge (Type 1)	09/05/2025	8 days	8000
			Discount	0
			Grand Total	8000

Payment Mode	
Cash	
Dational Cinnellana	Librarital Authority
Patient Signature	Hospital Authority