



**Patient Name:** MR.SHANKAR ASHOK WALMIKI  
**Department:** GENERAL MEDICINE  
**Consulting Dr.:** Sumedh Kirdak

**IPD ID:** 11825052025  
**Receipt No.:** IPD-11825052025  
**Admitted Date:** 22/05/2025

### Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For Triple Sharing	21/05/2025 - 26/05/2025	5 days	19000
2	ECG	22/05/2025	1	400
3	CHEST XRAY	22/05/2025	1	600
4	HGT	22/05/2025	1	100
5	Doctor Visit - Sumedh Kirdak	22/05/2025, 22/05/2025, 23/05/2025, 23/05/2025, 24/05/2025, 24/05/2025, 25/05/2025, 25/05/2025, 26/05/2025, 26/05/2025	9	2700
<b>Grand Total</b>				<b>23000</b>

**Payment Mode:** Cash

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Patient Signature

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Hospital Authority