



Reg No: MH/THA/NA073

**Patient Name:** DR. PANKAJ . H. PAWAR  
**Department:** GENERAL MEDICINE  
**Consulting Dr.:** Dr. Sumedh Kirdak  
**Admitted Date:** 11/09/2025

**IPD ID:** IPD/30/09/2025  
**Receipt No.:** IPD-IPD/30/09/2025  
**UH ID:** AH/09/2025/30  
**Discharged Date:** 11/09/2025

### Billing Details

No	Description	Date	Qty	Amount
1	Room Charge For Triple Sharing	11/09/2025	1 day	4300
				<b>Paid Amount</b> <b>4300</b>
				<b>Grand Total</b> <b>4300</b>

**Payment Mode:** Online

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Patient Signature

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Hospital Authority