

10th October 2023

INVOICE NO: SIGN C202309011*1ELSH

The Human Resources Manager
Elshcon Nigeria Ltd,
Deborah Lawson House
G.R.A.Phase 3
Port Harcourt.

Dear Sir,

SETTLEMENT OF HOSPITAL BILLS (SIGNATURE WING)

We hereby present for settlement, medical Treatment bill incurred by your staff in our facility for the month of September 2023
The total sum is ₦ 7,200.00 (Seven Thousand Two Hundred Naira only)

Account Details: Name-Princess Medical Centre.
A/C No: 4010287688
Sort Code: 070210529
Bank: Fidelity Bank

This bill will be due for payment on the 30th of October 2023

Thanks for your patronage

Yours faithfully,

For: PRINCESS MEDICAL CENTRE


DELIGHT NNAH
Billing Officer


CHINEDU OKONYIA
Head of Account & Finance

DATE.....

3B, NDABROS STREET, TRANS AMADI INDUSTRIAL LAYOUT, PORT HARCOURT.



PRINCESS MEDICAL CENTRE (SIGNATURE WING)

MEDICAL BILL FORM INVOICE SIGN 202309011*1ELSH

PRINCESS MEDICAL CENTRE (SIGNATURE WING)						
MEDICAL BILL FORM INVOICE SIGN 202309011*1ELSH						
NAME OF THE ESTABLISHMENT; ELSHCN NIG. LTD MEDICAL BILL FOR 2023.SIGNATURE SEPTEMBER						
S/N	DATE	NAMES OF PATIENT	AGE	DIAGNOSIS	TEST /SERVICE RENDER	COST TOTAL
1	18/09/2023	DAMIETE KARI .G. BRIGGS	36YRS	ABDOMINAL PAIN ? CAUSE	CONSULTATION ABDOMINO-PELVIC SCAN	2,400.00 4,800.00 7,200.00
					TOTAL	7,200.00

