Service Payment Report

ld	Payment Item Code	Service Name	Quantity	Unit Prize	Total Amount	Created Date
16	CMN20240427232751725	X-ray Charge	1	200	200	4/29/2024
15	MED20240427232727806	Paracetamol 500 mg	1	12	12	4/29/2024
14	CMN20240427232751627	MRI Charge	1	400	400	4/29/2024
13	MED20240427232727322	Oxycodone	6	32	192	4/29/2024
12	MED20240427232727226	Tylenol	6	42	252	4/29/2024
11	MED20240427232727806	Paracetamol 500 mg	15	12	180	4/29/2024
10	LAB20240427232810239	Hemoglobin A1C	1	500	500	4/29/2024
9	LAB2024042900440729	Malaria	1	1500	1500	4/29/2024
8	CMN20240427232751391	Consulting Charge	1	300	300	4/29/2024
7	CMN20240427232751391	Consulting Charge	1	300	300	4/29/2024
6	CMN20240427232751391	Consulting Charge	1	300	300	4/29/2024
5	LAB20240427232810239	Hemoglobin A1C	1	500	500	4/28/2024
4	LAB20240427232810662	Complete Blood Count(CBC)	1	200	200	4/28/2024
3	CMN20240427232751464	Medicine Charge	1	500	500	4/28/2024
2	LAB20240427232810239	Hemoglobin A1C	1	500	500	4/28/2024
1	CMN20240427232751391	Consulting Charge	1	300	300	4/28/2024

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