

TAX INVOICE

ORIGINAL

GNUZBA2 / FB / 22.10.2018 1546 hrs / Page 1 of 2

GST REG NO: M90368910N

SINGAPORE

Patient: Kumarsanga

Bill Ref Number

Tax Invoice Number:6818337074E0010 :6818337074E-0010-01

Tax Invoice Date :22.10.2018 1546 hrs

Patient NRIC/HRN :S___

1

Visit Date

:22,10,2018 1153 hrs Visit / Bill Location : GCLHAEC / GCLHAEC /

HAE

Payment Class

:PRIVATE

Payment Class	
Type of Supply	:

Cash/Credit

SERVICE CODE	DESCRIPTION	QUANTITY	AMOUNT(S\$)
	LABORATORY INVESTIGATIONS	Subtotal	2296.5
HLA03074	HLA DQB TYPING (PCR INT TO HIGH RES)	1	243.93
HF703102	HANDLING FEE	1	18.00
HLA09027	HLA ABCDR TYPING (SBT) FOR LOCAL TRANSPLANT	1	885.98
HF703102	HANDLING FEE	1	18.00
10009606	CREATININE CLEARANCE TEST (CCT)	1	24.90
10010709	GLUCOSE-6-PHOSPHATE DEHYDROGENAS	1	23.30
10010709	GLUCOSE-6-PHOSPHATE DEHYDROGENAS	1	23.30
10019326	VARICELLA-ZOSTER IGG AB	1	43.80
10024120	CYTOMEGALOVIRUS IGM AB	1	54.00
10025806	ANTIBODY TITRATIN SALINE	2	86.40
10030509	VDRL TEST	1	38.70
10033603	HEPATITIS B SURFACE ANTIGEN (HBS)	1	28.70
10033647	HEPATITIS C ANTIBODY	1	50.20
11007650	VNTR ANALYSIS	1	297.80
1Z70213002	ZIKA VIRUS PCR	1	150.00
22002309	HIV SCREEN~	1	37.80
70205046	HEPATITIS B CORE TOTAL AB	1 .	53.90
70205050	CYTOMEGALOVIRUS IGG AB EIA	1	41.10
70205065	HTLV I/II ANTIBODY	1	103.90
ABO	ABO AND RHO TYPING	2	72.80
		Subtotal Charges	2296.5
		Total Charges Fayable	2296.5
AMOUNT PAYABLE BEFORE TAX			2296.5
ADD: 7% GST			160.7
AMOUNT PAYABLE AFTER TAX		a good prop	2457.21
NET AMOUNT PAYABLE	RE	CENTED	2457.28
TE! AMOUNT ANDEL	2 0	NOV 2010	2457.28
	2 β	NOV 2018	
PAYMENT	(પોરુ	d Ciry Pegn	0.00
AMOUNT DUE FROM			2457.2
*** You are served by ZAWIYAH BIN			

The Cancer Centre

290 Orchard.Road #17-05/06 Paragon Singapore 238859 Tel 6835 1000 Fax: 6235 2261

GST Reg No: 200723619G

Co Reg No: 200723619G

TAX INVOICE

Involce No.

: 40053

Our Reference : 04060

Date

: 04 Apr 2017

PATIENT

والمعادد بالمالية

tion .

(GL_

DESCRIPTION	UNIT PRICE	QTY NET TOTAL FEE (\$)		
ALBUMIN 20% INF	142.35	4.00		569.40
ATACAND 4MG TABLET	1.60	90.00 Tabs		144.00
RESOURCE BENEPROTEIN POWDERX	26,35	2.00 Pkts		\$56.39 52.70
FDG PET SCAN	2,100.00	1.00	2,100.00	
REPEAT CONSULT	73.00	1.00	73.00	
CANNULATION/VENEPUNCTURE	34.00	1.00	34,00	
HEPARIN SALINE 1001U/5ML INJ	17.25	1.00		17.25
VOLUMETRIC SET FOR INFUSION	27.10	1.00 Unit		27.10
HYDRATION (PER HOUR BLOCK)	180.00	1.00		180.00
FULL BLD COUNT, RENAL & LIVER FC02+RF05+LVA	82.00	1.00		82.00
FULL BLD COUNT, RENAL & LIVER FC02+RF05+LVA	82.00	1.00		82.00
CEA	30.00	1,00		30.00
		Sub-Total	1	3,391.45
		Add GST 7.0%	4	237.40
		Total Amount Payable	3	3,628.85
	CARD Payment	Received - Receipt No. 39115	7:	3,628.85
		Outstanding Balance	;	0.00

All Cheques should be crossed and made payable to:

Cancer Centre Pte Ltd

\$3577.46

Patient is deemed to have fully understood the product, treatment procedure and/or services described on this invoice before confirming order and making payment.

All items sold are non-refundable.

Any party who is under a contractual obligation to reimburse the medical expenses shown on this bill, is required to refund to Medisave and Medishield OR the Medisave-approved Integrated Plan.

To make payment to Medisave and MediShield, please send a cheque to CPF Board or pay over the Internet (more information at www.cpf.gov.sg). To make payment to the Medisave-approved Integrated Plan, please send a cheque directly to the private insurer operating the Medisave-approved Integrated Plan. All cheques are to be accompanied with a photocopy of this bill and a payment advice on the proportion of reimbursement to be credited to Medisave and MediShield OR the Medisave-approved Integrated Plan.

This is a computer generated invoice which does not require a signature

E. & O.E

RECEIVED 1 0 APR 2017 Med Clm Regn (Changi)