



Rumah Sakit St. Carolus

Jalan Salemba Raya No. 41
Jakarta 10440
Phone : +6221 - 390 4441
Fax :

INVOICE

Transaction Detail Discount

(NPWP :)

Patient Name : KURNIADI DJAMILI LIE
Date of Birth : 17-Jan-1972
Registration No : NOP/20230926/00253
Registration Date : 26-Sep-2023
Registered Physician : drg. Maria Priscilla, Sp.KG
Referrer Physician :

Medical No : 00-B2-01-98
Service Unit / Class : Klinik Spesialis Gigi Konservasi | Kelas Rawat Jalan
Room / Bed No :
Corporate : PERSONAL
Corporate Account No :
Discharge Date : -

TRANSACTION

| Date | Item Name | Charge Class | Charges Qty | Discount | Personal Amount | Corporate Amount |
|--|---|-------------------|-------------|------------|---------------------|------------------|
| OUTPATIENT Klinik Spesialis Gigi Konservasi | | | | | | |
| Pelayanan Klinik Spesialis Gigi Konservasi | | | | | | |
| 26-Sep-2023 | Administrasi Rawat Jalan | Kelas Rawat Jalan | 1.00 X | 0.00 | 100,000.00 | 0.00 |
| 26-Sep-2023 | Konsultasi Dokter Spesialis (URJ) drg. Maria Priscilla, Sp.KG | Kelas Rawat Jalan | 1.00 X | 247,500.00 | 82,500.00 | 0.00 |
| 26-Sep-2023 | Perawatan Seluruh Akar per Kunjungan - Berat | Kelas Rawat Jalan | 1.00 X | 0.00 | 798,000.00 | 0.00 |
| 26-Sep-2023 | Retreatment (Bongkar Gutta Percha) | Kelas Rawat Jalan | 1.00 X | 0.00 | 500,000.00 | 0.00 |
| Sub Total | | | | | 1,480,500.00 | 0.00 |
| Sub Total OUTPATIENT | | | | | 1,480,500.00 | 0.00 |
| TOTAL TRANSACTION | | | | | 1,480,500.00 | 0.00 |

| | | |
|---------------|---|------|
| Cash | : | 0.00 |
| Credit Card | : | 0.00 |
| Debit Card | : | 0.00 |
| Transfer Bank | : | 0.00 |
| Voucher | : | 0.00 |

| | | |
|--------------------|---|------|
| Down Payment | : | 0.00 |
| Refund | : | 0.00 |
| Account Receivable | : | 0.00 |

| | | |
|-------------------|--------------|--------------|
| Total Transaction | Personal | Corporate |
| Total Admin | 1,480,500.00 | 0.00 |
| Total Coverage | 0.00 | 0.00 |
| Total INACBG's | 0.00 | 0.00 |
| Rounding | 0.00 | 0.00 |
| | | 1,480,500.00 |

| | | |
|-------------------------|--------------|------|
| Grand Total Transaction | 1,480,500.00 | 0.00 |
| Total Payment | 0.00 | 0.00 |
| Balance Total | 1,480,500.00 | 0.00 |

| Deposit No / Payment No | Payment Date | Patient Name | Refund | Payment Amount |
|------------------------------|--------------|--------------|--------|----------------|
| TOTAL PAYMENT RECEIVE | | | | |
| | | | | 0.00 |

Patient

Processed By

KURNIADI DJAMILI LIE



Rumah Sakit St. Carolus

Jalan R. S. Karim St. Carolus
Jakarta Selatan Raya No. 41 - Jakarta
Telp. 021-3904441
Fax. 021-3103226

Phone/Fax : +6221 - 390 4441

K.23 0105408

KWITANSI

PAYMENT RECEIPT

Nomor Kwitansi : KRJ/2023/00101788
Payment Receipt Number
Tanggal Kwitansi : 26-Sep-2023 | 10:13:00
Payment Receipt Date
Sudah Diterima Dari : KURNIADI DJAMILI LIE
Received From
Uang Sejumlah : Rp 1,480,500.00
Amount
Terbilang :
Amount in Word

SATU JUTA EMPAT RATUS DELAPAN PULUH RIBU LIMA RATUS RUPIAH
ONE MILLION FOUR HUNDRED AND EIGHTY THOUSAND FIVE HUNDRED RUPIAH

Keterangan : (00-82-01-98) KURNIADI DJAMILI LIE | NOP/20230926/00253 | Klinik Spesialis Gigi Konservasi

Remarks

THANK YOU

Diagnosa.
G nekrosis pulpa.



Hendriyanto