

INVOICE

To:

Name: BRYAN WILIGO
PONDOK PAKULONAN H/14 , RT.02/04
PAKU ALAM
SERPONG UTARA
Poskod: 00000

Invoice No: 1127942
Tanggal/Jam Masuk: 06/10/2023 / 10:37
Tanggal/Jam Keluar:
No of Day Stay: ?
Inv. Date: 06/10/2023

Pasien: 175244 - 0001
KTP: 3674022308040005
Nama: BRYAN WILIGO
PONDOK PAKULONAN H/14 , RT.02/
PAKU ALAM
SERPONG UTARA
Poskod: 00000

Ward/Bed: /
Admit. Doctor: MO054

HOSPITAL

Price Code	Description	Trans Date	Amount (Rp)	Tax Amt (Rp)	Payable Amt (Rp)
06100065	REGIST.PASIEN UGD - BARU	06/10/2023	50,000.00	0	50,000

REGIST.PASIEN UGD - BARU

50,000

51010900	ASAM MEFENAMAT 500MG TAB OGB B	06/10/2023	10,610.00	1,167	11,777
51011442	CETIXIM 100 MG OGB. DEXA	06/10/2023	33,640.00	3,700	37,340
51090018	BIOPHACENTON GEL (neomycin sul	06/10/2023	45,932.00	5,053	50,985
51150040	UNDERPAD SENSI PADS	06/10/2023	10,536.00	1,159	11,695
51180332	POVIDONE IODINE INTISUMBER 1 L	06/10/2023	1,320.00	145	1,465

PHARMACY

113,262

52120062	GAUZE PAD NON XRAY 6X6CM "HOSP	06/10/2023	66,720.00	0	66,720
52370133	KASA STERILE 16 X 16 DRC	06/10/2023	23,868.00	0	23,868
52373018	HAND SCOON NON STERIL UKURAN	06/10/2023	9,090.00	0	9,090

SURGICAL / MEDICAL SUPPLIES

99,678

Group Total

262,940

CONSULTANT
06100546

KONSULTASI DR UMDM MARSYA NURS 06/10/2023 120,000.00 0 120,000

CONSULTANT FEES

120,000

Group Total

120,000

ROUNDING ADJUSTMENT

Price Code Description

 29999999 ROUNING ADJUSTMENT

Trans Date

 06/10/2023

Amount (RP)

 -40.18

Tax Amt (RP)

 0

Payable Amt (RP)

 -40

ROUNDING ADJUSTMENT

-40

Group Total

-40

Total Bill Amount
 Deposit Paid
 Total Amount To Be Paid / (Refund)

382,900
 382,900
 0

Pay

NOTE:-

-
- A) ERROR AND OMISSION EXCLUDED.
 - B) INTEREST WILL BE CHARGED ON OVERDUE ACCOUNT
 AT THE RATE OF 1.5% PER MONTH.
 - C) COMPUTER GENERATED DOCUMENT DOES NOT NEED ANY SIGNATURE

OKASIR



RUMAH SAKIT MEDIKA BSD

Jl. Letnan Soetopo Kav. Kom. III A No. 7, BSD, Tangerang, 15330 Banten
Telp. 021-5372296 (Hunting), Fax. 021-5382296
Emergency 021-5378609, Website : www.rs-medikabsd.co.id

OFFICIAL RECEIPT

RECEIPT NO: BILL4-000049797 (1127942)

PAYER CODE: CASH

PAYER NAME: BRYAN WILOGO

PATIENT: 175244 - 0001

NAME: BRYAN WILOGO

DOCTOR: MO054 Dr. Nistina Pradya

EPISODE TYPE: OP

REGISTER: 06/10/2023 / 10:37

RECEIPT DATE: 06/10/2023 / 11:01

PAY BY: CIMBM

CASHIER: SELVY

REFERENCE: 416

Being payment received for:

AMOUNT (RP)

PAYABLE AMT (RP)

REGIST, PASIEN UGD - BARU

50,000

50,000

PHARMACY

102,038

113,262

SURGICAL / MEDICAL SUPPLIES

99,678

99,678

CONSULTANT FEES

120,000

120,000

-40

-40

ROUNDING ADJUSTMENT

TOTAL AMOUNT

382,900

TOTAL RECEIPT

382,900

TOTAL OUTSTANDING

0

REMARK : Cash Bill

PRINT DATE : 06/10/2023

** COMPUTER GENERATED DOCUMENT DOES NOT NEED ANY SIGNATURE **

