

INVOICE



Registration No / MR : OPA2307080448 / 10-05-09-26
Name : NILNA HALWATUL HAMIDAH
Address : PERUMAHAN TAMAN SENTOSA BLOK E1/12B
Patient Type : PRIVATE
Primary Doctor : dr. Sylvia Alicia Salim

Invoice No : OIV2307080429
Invoice Date : 08-Jul-2023 18:33
Registration Date : 08-Jul-2023 17:48

No	Name	Description	Qty	UOM	Amount	Disc.	Patient
CONSULTATION AND VISIT							
1	CONSULTATION GP CLINIC	dr. Sylvia Alicia Salim	1		65.000	0	65.000
DRUGS							
2	CETIRIZINE 10MG TAB	PHARMACY OUTPATIENT	10	TAB	6.022	0	6.022
3	FG TROCHES TAB	PHARMACY OUTPATIENT	15	TAB	36.561	0	36.561
4	SANADRYL DMP 60ML SYR	PHARMACY OUTPATIENT	1	FLS	23.660	0	23.660
5	INPEPSA 200ML SYR	PHARMACY OUTPATIENT	1	FLS	149.850	0	149.850
6	CEPTIK 200MG CAP	PHARMACY OUTPATIENT	10	CAP	688.866	0	688.866

SUB TOTAL : 969.958 0 969.958

ADMIN CHARGE : 45.000

ROUNDING : 42

TOTAL : 1.015.000

PAYMENT : 1.015.000

BALANCE : 0

IN WORDS PATIENT : Satu juta lima belas ribu rupiah

PATIENT RECEIPT / KUITANSI :

Type	Date	Payment Mode	Account No	Account Name	Description	Cashier	Patient
Payment	08/07/23	Debit Card	XXXXXXXXXXXX5361	-	BCA, Ref No: 000956	Annisya Pebriyanti	1.015.000

TOTAL : 1.015.000

CASHIER



Annisya Pebriyanti

