

INCISIVESOFT

Sex: Male

DISCHARGED PATIENT BILL(IPD)

Patient Id: MR-1409-0035 Admission Date: 25-09-2014 10:43

Patient Name:khadim Discharge Date: Contact No: 03422452627 Age: 18

Physician:Dr Mudassir PVT/Company: Private

DETAIL OF PAYMENT SCHEDULE										
S.No.	Receipt #:	Recieved DDT:	Total Amount	Discount%	Discount Amount	Grand Total	Recieved Amount			Amount
			0		0		0			0
					Total Amount			0		
DETAIL OF ADVANCE PAYMENT										
S.No.		Receipt #:	Re	cieved DDT:	Total Amount:		Discount:		Advance Amount	
Advance Payment - Grand Total 0										
BED CHARGES										
S. No.	Patient Reg No.	eg No. Patient Name		Occupied Bed	Days Bed Allotment Occupied Date/Time		ent		Charges	
Grand Total:										0
DETAILS OF ZAKAAT(s)										
S. No.			Zakaat Date				Zakaat Amount			
1			30-09-2015				1000			
Grand Total:										1,000
DETAIL OF SERVICE CHARGES										
S.No.	Service Category	Description	Service Amount	Service Date	Qty	Discount%	Discount Amount	Service Charges	Adv. + Recvd. Amount	Due Amount
No Service is selected										
Grand Total:						0	0	0	0	-1,000