

Odisha Hospital

 $Near\ Railway\ Station, Master\ Canteen, BBSR-1$

Phone: 9437094370,Email: enquiry@odihos.com

Invoice No: 4

Invoice Date: 17-Aug-2023

Company Name :ICICI LombardDate of Insurance :04-Mar-2023Scheme :PlatinumCover Percentage :90.00%

Patient Name : Kalyan Nayak Address : Cuttack

Phone number: 9437194374 **Email:** kalyan@gmail.com

SI.No	Date of Billing	Perticular	Amount	Cover %	Convered Amount	Self Paid Amount
1	02-Jun-2023	Admission	2000.00	90.00%	1800.00	200.00
2	24-Jun-2023	Operation	80000.00	90.00%	72000.00	8000.00
3	30-Jun-2023	Service	23000.00	90.00%	20700.00	2300.00
4	02-Jul-2023	Bed	42000.00	90.00%	37800.00	4200.00
	Total		147000		132300	14700

Computer Generated Invoice does not Need Signature