



الزدارة المالية

acility Name: Ha	amad General Hos	pital							Colle	ection Receipt
MRN		8852242					QID 3113560725		l	
Patient Name		ZIYA MOOSAN MUKRI (زا ما)								
Receipt No.		101027169896					Receipt Date		12/06/2024 07:55 AM	
Health Card Exp. Date		12/06/2025					Billing Category		RESIDENT (Indian)	
Residence Exp. Date		01/04/2025					Sub Billing Category			
Credit Group		Self Pay					Policy Detail		Self Pay Policy	
Trans. #	Service Code	Service De	scription	Rate	Qty.	Gross Am	Gross Amount Discount		Credit Share	Net Amount (QR)
Health Card Bill	[HCB4896691] /O	ut-Patient/0//Co	llection							
HCB4896691	HCR01	New Issued Healthcard		100.00	1.000		100.00		0.00	100.0
Total Bill Amoun	t (QR) :	100.00								
Pay Mode	Amount (QR)	Charge %	Charge Amount	Received Amt.	Ref. Name		Ref. No		Ref. Date	
Debit card	100.00	0.00	0.00	100.00	MASTERCARD (0027) 33749701 98866		001607005			12/06/2024

Collected By : Sumayya Mohammad A S Qureshi Printed By : Sumayya Mohammad A S Qureshi

Collection

MRN:

HC PHCC Location:

Qatar University

8852242

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