

Milan, 21/11/2023  
Protocol 6651/23/ARS/AZ/tv

To the kind attention  
MARINOV MIHAIL ILYANOV family

We hereby transmit, in relation to the hospitalization at our facility on 14 August 2023:

- Invoice no. 1700014983 equal to € 48.214,65
- Invoice no. 1700014984 equal to € 3.564,00
- Invoice no. 354/2023 equal to € 12.000,00 (Prof. Mortini Pietro medical fee)

The balance to be paid by you is equal to **€ 11.931,41** (net of security deposits € 29.440,13 of 01 August 2023, € 14.283,71 of 27 September 2023 and € 8.123,40 of 03 October 2023).

This amount can be settled by bank transfer made out to the following:

**IBAN (Coordinate Bancarie Europee):** IT33 J 02008 05364 000101973905  
**IBAN (Coordinate Bancarie Internazionali):** BIC CODE UNCRITMMORR  
**Intestazione:** OSPEDALE SAN RAFFAELE S.R.L. Via Olgettina, 60 - 20132 Milano  
**C.F. e P.IVA:** 07636600962  
**Causal payment:** Protocol payment 6651/23/ARS/AZ/tv

Please note that by proceeding with the balance indicated above the invoice is considered received.

We are at your disposal for any further clarification.  
Best regards.

**Ospedale San Raffaele S.r.l.**  
Via Olgettina 60, 20132 Milano  
**Area Amministrativa Ricoveri Solventi**  
tel 02.26432800  
fax 02.26437757  
@ - [info.ricoverisolventi@hsr.it](mailto:info.ricoverisolventi@hsr.it)

**Ospedale San Raffaele S.r.l.**  
Istituto di Ricovero e Cura a Carattere Scientifico

Via Olgettina 60 – 20132 Milano (MI) | Tel. +39 02.26431 | [info@hsr.it](mailto:info@hsr.it)  
C.F., P.IVA e Reg. Imp. Milano 07636600962 – C.C.I.A.A. 1972938  
Capitale Sociale € 60.817.200 i.v.

[www.hsr.it](http://www.hsr.it)

Sistema Sanitario  **Regione  
Lombardia**

 **UniSR**  
Università Vita-Salute  
San Raffaele

**INVOICE NO. 1700014983**

Date 21.11.2023

Customer Number 1071083996

Internal Ref.: 4228390375

MARINOV MIHAIL ILIYANOV  
PREVEN STR. ZAHARI STOYANOR 32  
00099 BULGARIA - STP-EX

Item	Quantity	Description	Unit Price	Total Price	VAT
		<i>Your Ref.</i>			
	3,0	EMOCROMOCYTOMETRIC EXAM	17,09	51,27	10
	5,0	DIFENILIDANTOIN	31,88	159,40	10
	3,0	BLOOD CULTURE FOR ANAEROBIC	54,10	162,30	10
	3,0	BLOOD CULTURE FOR AEROBIC	54,10	162,30	10
	2,0	CULTURE EXAMINATION OF VASCULAR CATHETER	31,11	62,22	10
	6,0	PARTIAL THROMBOPLASTIN TIME	13,35	80,10	10
	3,0	TOTAL AND FRACTIONAL S-BILIRUBIN	11,88	35,64	10
	3,0	S-CHOLINESTERASE	14,08	42,24	10
	2,0	S-PROTEIN ELECTROPHORESIS	27,41	54,82	10
	3,0	S-GLUCOSE	11,88	35,64	10
	6,0	PROTHROMBIN TIME	13,35	80,10	10
	3,0	S-UREA	11,88	35,64	10
	3,0	BLOOD CULTURE FOR ANAEROBIC SEARCH FROM VASCULAR CATHETER	54,10	162,30	10
	3,0	BLOOD CULTURE FOR AEROBIC SEARCH FROM VASCULAR CATHETER	54,10	162,30	10
	9,0	COMPLETE BLOOD COUNT EXAMINATION + DIFFERENTIAL	17,79	160,11	10
	10,0	S-SODIUM	12,59	125,90	10
	10,0	POTASSIUM	11,88	118,80	10
	9,0	S-TOTAL CALCIUM	13,35	120,15	10
	6,0	S-ASPARTATO AMINO transferase	11,88	71,28	10
	6,0	S-ALANINE aminotransferase	11,88	71,28	10
	6,0	S-gammaglutamil TRANSF	14,08	84,48	10
	6,0	S-CREATINE KINASE	14,08	84,48	10
	5,0	S-CREATININE	13,35	66,75	10
	10,0	PROTEIN C REACTIVE	16,30	163,00	10
01100	1,0	PHYSIOTHERAPY REHABILITATION	112,50	112,50	10
02200	1,0	BRAIN STANDARD CMC gadolinium MR	902,50	902,50	10
02300	1,0	ANESTHESIA FOR MRI	555,00	555,00	10
02400	1,0	PHYSIOTHERAPY REHABILITATION	112,50	112,50	10
04900	1,0	PHYSIOTHERAPY REHABILITATION	112,50	112,50	10

**INVOICE NO. 1700014983**

Date 21.11.2023

Customer 1071083996

Pag. 2

Item	Quantity	Description	Unit Price	Total Price	VAT
05600	1,0	VES	11,11	11,11	10
05900	59,0	PHYSIOTHERAPY REHABILITATION	112,50	6.637,50	10
07400	1,0	S-TOTAL PROTEIN	11,88	11,88	10
07600	1,0	TYPE AND GROUP	36,00	36,00	10
07700	1,0	BRAIN CMC CT	286,25	286,25	10
07800	1,0	CHEST XR (1 PROJECTION)	96,25	96,25	10
07900	1,0	CULTURE EXAMINATION OF ANAL BUFFER (CIO)	40,03	40,03	10
08400	1,0	FROM catheter Urinoculture	24,75	24,75	10
08500	1,0	CULTURE AND MICROSCOPIC EXAMINATION OF BRONCHIAL SUCTIONING	40,03	40,03	10
11600	4,0	INTERNAL MEDICAL VISIT - INFECTIOUS DISEASES	132,50	530,00	10
11900	2,0	S-TOTAL PROTEIN	11,88	23,75	10
14200	2,0	FISH - SINGLE DETERMINATION	550,00	1.100,00	10
14300	1,0	QUANTITATIVE ANALYSIS OF HUMAN NUCLEIC ACIDS BY REAL TIME PCR (RTPCR)	393,75	393,75	10
14400	32,0	DAILY HOSPITALIZATION FEE FOR NEUROSURGERY	500,00	16.000,00	10
14500	3,0	DAILY HOSPITALIZATION FEE NEUROSURGICAL INTENSIVE CARE	500,00	1.500,00	10
14600	8,0	DAILY HOSPITALIZATION FEE FOR NEUROSURGERY	500,00	4.000,00	10
14700	1,0	DRUGS	1.231,45	1.231,45	10
14800	12,0	SURGICAL MATERIALS FOR COMPLEX SURGERY (PER DAY IN HOSPITAL)	43,75	525,00	10
14900	1,0	OPERATING ROOM FIRST HALF-HOUR OR FRACTION THEREOF NEUROSURGERY	600,00	600,00	10
15000	9,0	OPERATING ROOM FOLLOWING HALF HOUR OR FRACTION THEREOF	456,25	4.106,25	10
15100	1,0	HISTOLOGICAL EXAMINATION	975,00	975,00	10
15200	1,0	RM SPINE IN TOTO CMC	1.462,50	1.462,50	10
15300	1,0	PEDIATRIC ELECTROCARDIOGRAM	52,50	52,50	10
				43.831,50	

**INVOICE NO. 1700014983**

Date 21.11.2023

Customer 1071083996

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Item	Quantity	Description	Unit Price	Total Price	VAT
		<b>VAT Summary:</b>			
Cod.	Rate (%)	Description	Taxable	VAT Amount	
V1	10,0		43.831,50	4.383,15	
SO	0,0	NHS tax-exempt amount	0,00	0,00	
		<b>Total Taxable</b>		43.831,50	
		<b>VAT Total</b>		4.383,15	
		<b>Stamp</b>		0,00	
		<b>Total Invoice Value (EURO)</b>		<b>48.214,65</b>	
		<b>Payment:</b>			
		<i>Payment conditions:</i> payment at invoice sight			
		<b>Support Bank :</b>			
		UNICREDIT SPA Fil. Corporate Operations			
		Fil. Corporate Operations - IBAN IT33J 02008 05364 000101973905			

EXEMPT FROM STAMP OBLIGATIONS

**INVOICE NO. 1700014984**

Date 21.11.2023

Customer Number 1071083996

Internal Ref.: 4228390376

MARINOV MIHAIL ILIYANOV  
PREVEN STR. ZAHARI STOYANOR 32  
00099 BULGARIA - STP-EX

Item	Quantity	Description	Unit Price	Total Price	VAT
00100	1,0	<i>Your Ref.</i> NEUROSURGERY	3.240,00	3.240,00 <hr/> 3.240,00	10
Cod.	Rate (%)	<b>VAT Summary:</b> Description	Taxable	VAT Amount	
V1	10,0		3.240,00	324,00	
SO	0,0	NHS tax-exempt amount	0,00	0,00	
		<b>Total Taxable</b>		3.240,00	
		<b>VAT Total</b>		324,00	
		<b>Stamp</b>		0,00	
		<b>Total Invoice Value (EURO)</b>		<hr/> 3.564,00	
		<b>Payment:</b> <i>Payment conditions:</i> payment at invoice sight			
		<b>Support Bank :</b> UNICREDIT SPA Fil. Corporate Operations Fil. Corporate Operations - IBAN IT33J 02008 05364 000101973905			

EXEMPT FROM STAMP OBLIGATIONS

Fattura nr. 354/2023  
Data: 15/09/2023

Spettabile  
MIHAIL ILIYANOV MARINOV  
PREVEN STR. ZAHARI STOYANOR 32A  
PC5800  
BULGARIA

**Descrizione**

MEDICAL FEES FOR BRAIN SURGERY

**Corrispettivo**

€ 12.000,00

Imponibile

€ 12.000,00

**Totale dovuto**

€ 12.000,00

**Esenzioni IVA:**

€ 12.000,00 - Non Imp. Art.10 n.18 DPR 633/72

PROF. PIETRO MORTINI  
Primario e Professore Ordinario di  
Neurochirurgia  
P.IVA: 00940840192  
CF: MRTPTR61D14D150H  
www.pietromortini.com /  
www.ipofisi.com

Via Manzoni 16  
20121 Milano (MI)  
IBAN:  
IT04C0306901765100000679001  
BCITITMM  
mail: infoprofmortini@gmail.com