General Bill - Cash

Bill No	:	**OP47436**	HR No	:	**24664**
Bill Date	:	**17-09-2026 01:48:24 PM**	Age/Sex	:	**51Y 3M / Female**
Patient Name	:	**Mrs. SUJATHA P**			

Description	Amount
Dr. Bhargavi R	
1. *URINE CULTURE & SENSITIVITY	**550.00**
2. X-RAY KUB	**700.00**
Bill Amount	**1,250.00**

Received Amount	:	**Rs. 1250.00**
Received Amount in Words	:	**One thousand two hundred and fifty only**
Balance Amount	:	**Rs. 0.00**
Mode of Payment	:	**Card**
Bill Location	:	**Vinita Hospital, Nungambakkam**

Jayarajan M
Authorized Signatories

This is a system-generated bill. Therefore, no seal or signature is required.

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A unit of Vijay Ganga Speciality Care Pvt. Ltd.