

General Bill - Cash

Bill No : **OP46048** HR No : **18634**
Bill Date : **10-08-2026 06:26:53 PM** Age/Sex : **33Y 2M / Female**
Patient Name : **Mrs. ANUSUYA**

Description	Amount
Dr. Veena V C	
1. USG GYNAE SCREENING	400.00
2. Consultation Fees	400.00
Bill Amount	800.00

Mode of Payment : **E-Payment**
Bill Location : **Vinita Hospital, Nungambakkam**

Tharakavi S
Authorized Signatories

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