General Bill - Cash

Bill No	:	**OP47428**	HR No	:	**2058**
Bill Date	:	**17-09-2026 10:09:09 AM**	Age/Sex	:	**74Y 11M / Female**
Patient Name	:	**Mrs. ROOPA B.**			

Description	Amount
Dr. Sarita Vinod	
1. ECG	**400.00**
2. ECHO CARDIOGRAM	**3,000.00**
3. Thermal Mammogram Screening	**1,000.00**
Bill Amount	**4,400.00**

Received Amount	:	**Rs. 4400.00**
Received Amount in Words	:	**Four thousand four hundred only**
Balance Amount	:	**Rs. 0.00**
Mode of Payment	:	**E-Payment**
Bill Location	:	**Vinita Hospital, Nungambakkam**

Hemalatha E
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.