General Bill - Cash

Bill No	:	**OP47107**	HR No	:	**25672**
Bill Date	:	**06-09-2026 12:59:31 PM**	Age/Sex	:	**19Y 6M / Female**
Patient Name	:	**Miss. ALEENA PHILIP**			

Description	Amount
Dr. Krishna Kumaran A	
1. DIABETES TEST PACKAGE	**3,999.00**
Total	**3,999.00**
Discount	**1,999.00**
Bill Amount	**2,000.00**

Received Amount	:	**Rs. 2000.00**
Received Amount in Words	:	**Two thousand only**
Balance Amount	:	**Rs. 0.00**
Mode of Payment	:	**E-Payment**
Bill Location	:	**Vinita Hospital, Nungambakkam**

Jeevitha P
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.