

General Bill - Cash

Bill No : **OP45990** HR No : **22339**
Bill Date : **08-08-2026 12:15:04 PM** Age/Sex : **21Y 10M / Female**
Patient Name : **Miss. SIVA RANJANI**

Description	Amount
Dr. Ranjiith G. Dhakshina	
1. Diwali - Master Health Check	4,999.00
Total	4,999.00
Discount	2,499.00
Bill Amount	2,500.00

Received Amount : **Rs. 2500.00**
Received Amount in Words : **Two thousand five hundred only**
Balance Amount : **Rs. 0.00**
Mode of Payment : **E-Payment**
Bill Location : **Vinita Hospital, Nungambakkam**

Jayarajan M
Authorized Signatories

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