

General Bill - Cash

Bill No : **OP46377** HR No : **21039**
Bill Date : **19-08-2026 08:13:48 PM** Age/Sex : **48Y 2M / Male**
Patient Name : **Mr. S. GUNALAN**

Description	Amount
Dr. Pradeep Selvaraj	
1. IM Injection	100.00
Bill Amount	100.00

Received Amount : **Rs. 100.00**
Received Amount in Words : **One 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.