

General Bill - Cash

Bill No : **OP46476** HR No : **13061**
Bill Date : **22-08-2026 09:16:54 AM** Age/Sex : **63Y / Male**
Patient Name : **Mr. NIMISH TOLIA**

Description	Amount
Dr. Sarita Vinod	
1. USG ABDOMEN WITH PVV	2,000.00
2. Uroflowmetry	1,500.00
Bill Amount	3,500.00

Received Amount : **Rs. 3500.00**
Received Amount in Words : **Three thousand five hundred only**
Balance Amount : **Rs. 0.00**
Mode of Payment : **Card**
Bill Location : **Vinita Hospital, Nungambakkam**

Hemalatha E
Authorized Signatories

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