General Bill - Cash

Bill No	:	**OP46427**	HR No	:	**25313**
Bill Date	:	**20-08-2026 06:27:44 PM**	Age/Sex	:	**41Y 7M / Male**
Patient Name	:	**Mr. SHIVARAMAN**			

Description	Amount
1. BASIC (SELF CARE) PACKAGE	**999.00**
Total	**999.00**
Discount	**499.00**
Bill Amount	**500.00**

Mode of Payment : **Cash**

Bill Location : **Vinita Hospital, Nungambakkam**

Jayarajan M
Authorized Signatories

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

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