

General Bill - Cash

Bill No : **OP47238** HR No : **25734**
Bill Date : **10-09-2026 05:03:19 PM** Age/Sex : **37Y 2M / Female**
Patient Name : **Mrs. ASHA**

Description	Amount
Dr. Edal Queen Reni	
1. Registration Charges	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**

Hemalatha E
Authorized Signatories

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