

General Bill - Cash

Bill No : **OP46489** HR No : **25330**
Bill Date : **22-08-2026 12:49:24 PM** Age/Sex : **28Y 3M / Female**
Patient Name : **Ms. MAHESWARI A**

Description	Amount
Dr. Sanchaya Selvaraj	
1. *Pap Smear (LBC)	1,320.00
Bill Amount	1,320.00

Received Amount : **Rs. 1320.00**
Received Amount in Words : **One thousand three hundred and twenty 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.