

General Bill - Cash

Bill No : **OP47182** HR No : **25213**
Bill Date : **08-09-2026 06:20:01 PM** Age/Sex : **39Y 4M / Female**
Patient Name : **Mrs. PALLAVI PRABHU**

Description	Amount
Dr. Balaji Venkatachalam	
1. Consultation Fees	500.00
Bill Amount	500.00

Received Amount : **Rs. 500.00**
Received Amount in Words : **Five 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.