General Bill - Cash

Bill No	:	**OP49107**	HR No	:	**26473**
Bill Date	:	**15-11-2026 10:49:53 AM**	Age/Sex	:	**84Y / Male**
Patient Name	:	**Mr. VEERASAMY**			

Description	Amount
Dr. Sarita Vinod	
1. Ambulance 5 Kms + 5Kms	**2,200.00**
Bill Amount	**2,200.00**

Received Amount	:	**Rs. 2200.00**
Received Amount in Words	:	**Two thousand two hundred only**
Balance Amount	:	**Rs. 0.00**
Mode of Payment	:	**E-Payment**
Bill Location	:	**Vinita Hospital, Nungambakkam**

Chandrakala M
Authorized Signatories

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

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A unit of Vijay Ganga Speciality Care Pvt. Ltd.