

## General Bill - Cash

Bill No : **OP43673** HR No : **21572**  
Bill Date : **30-05-2026 01:19:39 PM** Age/Sex : **47Y / Female**  
Patient Name : **Ms. VISHAKA JAYAKUMAR**

Description	Amount
<b>Dr. Padmavati</b>	
1. Consultation Fees	<b>1,250.00</b>
<b>Bill Amount</b>	<b>1,250.00</b>

Received Amount : **Rs. 1250.00**  
Received Amount in Words : **One thousand two hundred and fifty only**  
Balance Amount : **Rs. 0.00**  
Mode of Payment : **E-Payment**  
Bill Location : **Vinita Hospital, Nungambakkam**

**Jayarajan M**  
Authorized Signatories

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