

## General Bill - Credit

Bill No : **OP45081** HR No : **1695**  
Bill Date : **16-07-2026 11:06:20 AM** Age/Sex : **83Y 7M / Female**  
Patient Name : **Mrs. VASUNDHARA**

| Description              | Amount          |
|--------------------------|-----------------|
| <b>Dr. Madhuri A N S</b> |                 |
| 1. Consultation          | <b>1,500.00</b> |
| <b>Bill Amount</b>       | <b>1,500.00</b> |

Pending Amount : **Rs. 1,500.00**  
Mode of Payment :  
Bill Location : **Vinita Hospital, Nungambakkam**

**Jeevitha P**  
Authorized Signatories

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