General Bill - Cash

Bill No	:	**OP48958**	HR No	:	**23539**
Bill Date	:	**11-11-2026 11:29:40 AM**	Age/Sex	:	**23Y 8M / Male**
Patient Name	:	**Mr. ARUNACHALAM**			

Description	Amount
Dr. P.S. Chitra	
1. Consultation Fees	**1,700.00**
Bill Amount	**1,700.00**

Mode of Payment	:	**E-Payment**
Bill Location	:	**Vinita Hospital, Nungambakkam**

Tharakavi S
Authorized Signatories

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

No.70, Josier Street, Nungambakkam, Chennai - 600 034.
P: +91 44 6903 9999, +91 72990 78999
E : info@vinitahealth.com | **W :** www.vinitahealth.com
A unit of Vijay Ganga Speciality Care Pvt. Ltd.