

General Bill - Cash

Bill No : **OP45006** HR No : **22955**
Bill Date : **14-07-2026 02:00:22 PM** Age/Sex : **49Y 8M / Female**
Patient Name : **Mrs. NEHA MELWANI**

Description	Amount
Dr. Bhargavi R	
1. USG KUB	2,000.00
Bill Amount	2,000.00

Received Amount : **Rs. 2000.00**
Received Amount in Words : **Two thousand only**
Balance Amount : **Rs. 0.00**
Mode of Payment : **E-Payment**
Bill Location : **Vinita Hospital, Nungambakkam**

Jeevitha P
Authorized Signatories

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