

General Bill - Cash

Bill No : **OP45516** HR No : **24954**
Bill Date : **27-07-2026 04:14:55 PM** Age/Sex : **19Y 1M / Female**
Patient Name : **Miss. AKSHAYA RAVI**

Description	Amount
Dr. Kamatchi Thulasi	
1. Consultation Fees	600.00
1. Registration Charges	100.00
Bill Amount	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.