

General Bill - Cash

Bill No : **OP45059** HR No : **23051**
Bill Date : **15-07-2026 06:16:24 PM** Age/Sex : **36Y 3M / Female**
Patient Name : **Mrs. C. DEVAKI**

Description	Amount
Dr. Veena V C	
1. Consultation Fees	2,300.00
Bill Amount	2,300.00

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.