

## General Bill - Cash

Bill No : **OP43711** HR No : **13601**  
Bill Date : **01-06-2026 06:58:30 PM** Age/Sex : **60Y / Female**  
Patient Name : **Ms. SIVAGAMA SUNDARI**

Description	Amount
<b>Dr. Sarita Vinod</b>	
1. Consultation Fees	<b>1,000.00</b>
<b>Bill Amount</b>	<b>1,000.00</b>

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

**Sivaranjani P**  
Authorized Signatories

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