General Bill - Cash

Bill No	:	**OP48840**	HR No	:	**1184**
Bill Date	:	**05-11-2026 01:19:05 PM**	Age/Sex	:	**35Y 7M / Male**
Patient Name	:	**Mr. Amarnath.R.**			

Description	Amount
Dr. Sarita Vinod	
1. Consultation Fees	**1,000.00**
Bill Amount	**1,000.00**

Mode of Payment : **Card**

Bill Location : **Vinita Hospital, Nungambakkam**

Tharakavi S
Authorized Signatories

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

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A unit of Vijay Ganga Speciality Care Pvt. Ltd.