# General Bill - Cash

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|---|---|---|---|---|---|
| Bill No | : | **OP44643** | HR No | : | **24607** |
| Bill Date | : | **04-07-2026 03:56:39 PM** | Age/Sex | : | **44Y 2M / Female** |
| Patient Name | : | **Mrs. SOWMYA** | | | |

| Description | Amount |
|---|---|
| **Dr. Padmavati** | |
| 1. Consultation Fees | **1,000.00** |
| | |
| 1. Registration Charges | **100.00** |
| **Bill Amount** | **1,100.00** |

| | | |
|---|---|---|
| Received Amount | : | **Rs. 1100.00** |
| Received Amount in Words | : | **One thousand one hundred only** |
| Balance Amount | : | **Rs. 0.00** |
| Mode of Payment | : | **Card** |
| Bill Location | : | **Vinita Hospital, Nungambakkam** |

**Jayarajan M**
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.**