

General Bill - Cash

Bill No : **OP44557** HR No : **24573**
Bill Date : **02-07-2026 04:49:38 PM** Age/Sex : **25Y 1M / Female**
Patient Name : **Miss. ANU**

Description	Amount
Dr. Janani P	
1. Consultation Fees	600.00
1. Registration Charges	100.00
Bill Amount	700.00

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.