

## General Bill - Cash

|              |                                    |         |                        |
|--------------|------------------------------------|---------|------------------------|
| Bill No      | : <b>OP44775</b>                   | HR No   | : <b>2336</b>          |
| Bill Date    | : <b>08-07-2026 06:12:27 PM</b>    | Age/Sex | : <b>50Y 8M / Male</b> |
| Patient Name | : <b>Mr. NAGESWAR REDDY BIJJAM</b> |         |                        |

| Description                            | Amount          |
|----------------------------------------|-----------------|
| <b><u>Dr. Ramesh Kumar</u></b>         |                 |
| <b><u>Dr. Mahin Nallasivam R R</u></b> |                 |
| 1. Consultation Fees                   | <b>1,200.00</b> |
| <b>Bill Amount</b>                     | <b>1,200.00</b> |

|                          |                                        |
|--------------------------|----------------------------------------|
| Received Amount          | : <b>Rs. 1200.00</b>                   |
| Received Amount in Words | : <b>One thousand two hundred only</b> |
| Balance Amount           | : <b>Rs. 0.00</b>                      |
| Mode of Payment          | : <b>Card</b>                          |
| Bill Location            | : <b>Vinita Hospital, Nungambakkam</b> |

**Jeevitha P**  
Authorized Signatories

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