General Bill - Credit

Bill No	:	**OP48951**	HR No	:	**16350**
Bill Date	:	**10-11-2026 10:01:03 PM**	Age/Sex	:	**61Y 4M / Male**
Patient Name	:	**Mr. MADAN CHAND M**			

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

Pending Amount	:	**Rs. 1,000.00**
Mode of Payment	:	
Bill Location	:	**Vinita Hospital, Nungambakkam**

Chandrakala M
Authorized Signatories

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

No.70, Josier Street, Nungambakkam, Chennai - 600 034.
P: +91 44 6903 9999, +91 72990 78999
E : info@vinitahealth.com | **W :** www.vinitahealth.com
A unit of Vijay Ganga Speciality Care Pvt. Ltd.