

General Bill - Cash

Bill No : **OP45599** HR No : **24364**
Bill Date : **29-07-2026 07:03:15 AM** Age/Sex : **63Y 1M / Male**
Patient Name : **Mr. SUNIL H RAJANKAR**

Description	Amount
Dr. Ranjiith G. Dhakshina	
1. Senior Citizen Package Male	9,999.00
Bill Amount	9,999.00

Received Amount : **Rs. 9999.00**
Received Amount in Words : **Nine thousand nine hundred and ninety-nine only**
Balance Amount : **Rs. 0.00**
Mode of Payment : **Cash**
Bill Location : **Vinita Hospital, Nungambakkam**

Jayarajan M
Authorized Signatories

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