

General Bill - Cash

Bill No : **OP45763** HR No : **15764**
Bill Date : **01-08-2026 12:04:51 PM** Age/Sex : **66Y 4M / Female**
Patient Name : **Mrs. PADMA R**

Description	Amount
Dr. Padmavati	
1. Consultation Fees	1,250.00
Bill Amount	1,250.00

Mode of Payment : **Card**
Bill Location : **Vinita Hospital, Nungambakkam**

Tharakavi S
Authorized Signatories

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