



# VIJAYASHREE HOSPITALS



## OP BILL CUM RECEIPT

Reg No : 1718/12940  
Patient Name : Mr. MAHESHA MG  
Age/ Gender : 29.0Y  
Address : MADHUMITRA LEYOUT JIGANI ANEKAL  
Category : REGULAR PAYING  
Billdate : 2/1/18  
Bill No : 1718/80873 11:00 am  
Ref.Dr. Name : Dr. SELF  
DR JISHA

Sl No.	PARTICULARS	Qty	Gross amount	Concession	AMOUNT
1	DR JISHA-DENTAL SURGEON	1.00	250.00	0.00	250.00
2	REGISTRATION CHARGES-Service	1.00	20.00	0.00	20.00
			270.00	0.00	270.00

### Bill summary

Net payable by patient	270.00	Net Received from patient	270.00
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### Payment Summary

Receipt No	Amt Received	Amt. Refund	Mode			
01718/26110	270.00	0.00	CS			

Amount in words

Two Hundred Seventy Rupees only

Received with thanks a sum of

ANUSHA

Cashier

Consultation will be valid for 06 days for same Doct

No. 187/2, Vinayaka (APC) Circle,  
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Jigani, Anekal Tq  
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