

## Receipt

|              |   |                     |              |   |                          |
|--------------|---|---------------------|--------------|---|--------------------------|
| HR No        | : | 1851                | Receipt No   | : | 048716                   |
| Patient Name | : | Mr. G.Gopi Gurusamy | Receipt Date | : | 02-09-2026   08:54:32 pm |
| Age          | : | 60Y 4M / Male       |              |   |                          |

Received **Rs.One Thousand Zero (1000)**\_\_\_ only from **Mr./ Ms. vgsc trust**\_\_\_ on the account of /  
for the purpose of **REGULAR DIALYSIS PATIENT DR SARITA VINOD FEES 100% DISCOUNT**\_\_\_  
**APPROVED BY DR SARITA VINOD**\_\_\_ in the mode of **,Trust**\_\_\_ with thanks.

Authorized Signatory

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