

## Receipt

|              |   |                 |              |   |                          |
|--------------|---|-----------------|--------------|---|--------------------------|
| HR No        | : | 2912            | Receipt No   | : | 048706                   |
| Patient Name | : | Ms. SANGEETHA M | Receipt Date | : | 02-09-2026   01:37:52 pm |
| Age          | : | 40Y 3M / Female |              |   |                          |

Received **Rs.Twenty Six Thousand Two Hundred And Fourty-one (26241)**\_\_\_ only from  
**Mr./ Ms. SANGEETHA M**\_\_\_ on the account of / for the purpose of **19 to 31st dialysis payment**\_\_\_  
**completed**\_\_\_ in the mode of **, Card - 674482/666532**\_\_\_ with thanks.

Authorized Signatory

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