Vinita HOSPITAL NABH CERTIFIED

Receipt

HR No	:	**24870**	Receipt No	:	**048468**
Patient Name	:	**Mr. K S RAJAGOPALAN**	Receipt Date	:	**20-08-2026 | 05:21:46 pm**
Age	:	**84Y 1M / Male**			

Received **Rs.Thirteen Thousand Nine Hundred And Seventy-five (13975)**__ only from **Mr./ Ms.** K S RAJAGOPALAN__on the account of / for the purpose of **after insurance approval ip final payment completde**__ in the mode of **Cash**__ with thanks.

Authorized Signatory

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

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