Receipt

HR No	:	**10277**	Receipt No	:	**048399**
Patient Name	:	**Mrs. VASUMATIBEN K DOLIA**	Receipt Date	:	**17-08-2026 | 02:56:25 pm**
Age	:	**77Y / Female**			

Received **Rs.Two Thousand Five Hundred (2500)**__ only from **Mr./ Ms.** VASUMATIBEN K DOLIA__on the account of / for the purpose of **H@H**__ 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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