

## Receipt

|              |   |                        |              |   |                                 |
|--------------|---|------------------------|--------------|---|---------------------------------|
| HR No        | : | <b>25172</b>           | Receipt No   | : | <b>048598</b>                   |
| Patient Name | : | <b>Mr. RANGANATHAN</b> | Receipt Date | : | <b>27-08-2026   03:54:59 pm</b> |
| Age          | : | <b>79Y 1M / Male</b>   |              |   |                                 |

Received **Rs.Seven Thousand Nine Hundred (7900)**\_\_\_ only from **Mr./ Ms. RANGANATHAN**\_\_

ATTENDER\_\_\_on the account of / for the purpose of **H@H PAYMENT**\_\_\_ in the mode of **E-Payment -**  
**177081**\_\_\_ with thanks.

Authorized Signatory

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