

## Receipt

|              |   |                         |              |   |                                 |
|--------------|---|-------------------------|--------------|---|---------------------------------|
| HR No        | : | <b>15690</b>            | Receipt No   | : | <b>048809</b>                   |
| Patient Name | : | <b>Ms. PREMALATHA G</b> | Receipt Date | : | <b>07-09-2026   02:43:02 pm</b> |
| Age          | : | <b>48Y 2M / Female</b>  |              |   |                                 |

Received **Rs.Four Thousand Eight Hundred And Seventy (4870)**\_\_\_ only from **Mr./ Ms.**

**PREMALATHA G / PAT**\_\_\_ on the account of / for the purpose of **DIALYSIS PAYMENT**\_\_\_ in the mode of  
**, Card - 698108**\_\_\_ with thanks.

Authorized Signatory

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