

## Receipt

|              |   |                            |              |   |                                 |
|--------------|---|----------------------------|--------------|---|---------------------------------|
| HR No        | : | <b>16232</b>               | Receipt No   | : | <b>049108</b>                   |
| Patient Name | : | <b>Mr. R M SUBRAMANIAN</b> | Receipt Date | : | <b>22-09-2026   02:47:19 pm</b> |
| Age          | : | <b>86Y 5M / Male</b>       |              |   |                                 |

Received **Rs.Four Hundred And Fourty (440)**\_\_\_ only from **Mr./ Ms. R M SUBRAMANIAN /LAB STAFF IREAN**\_\_\_on the account of / for the purpose of **H@H PAYMENT**\_\_\_ in the mode of **Cash**\_\_\_ with thanks.

Authorized Signatory

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