

## Receipt

|              |   |                    |              |   |                          |
|--------------|---|--------------------|--------------|---|--------------------------|
| HR No        | : | 23533              | Receipt No   | : | 048955                   |
| Patient Name | : | Mr. C.K.JAGANNATHA | Receipt Date | : | 14-09-2026   03:24:46 pm |
| Age          | : | 76Y 6M / Male      |              |   |                          |

Received **Rs.Eight Hundred And Ten (810)**\_\_\_ only from **Mr./ Ms. C.K.JAGANNATHA**\_\_\_ on the account of / for the purpose of **H@H payment**\_\_\_ in the mode of **E-Payment - 467913**\_\_\_ with thanks.

Authorized Signatory

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