

## Receipt

|              |   |                     |              |   |                          |
|--------------|---|---------------------|--------------|---|--------------------------|
| HR No        | : | 100                 | Receipt No   | : | 048400                   |
| Patient Name | : | Mr. SHEIGER KANNIAH | Receipt Date | : | 17-08-2026   04:18:41 pm |
| Age          | : | 74Y 10M / Male      |              |   |                          |

Received **Rs.One Hundred And Zero (100)**\_\_\_ only from **Mr./ Ms. SHEIGER KANNIAH**\_\_\_ on the account of / for the purpose of **JULY MONTH DIALYSIS PENDING AMT COMPLETED**\_\_\_ in the mode of **, Card - 474642**\_\_\_ with thanks.

Authorized Signatory

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