Vinita HOSPITAL NABH CERTIFIED

Receipt

HR No	:	**3139**	Receipt No	:	**046722**
Patient Name	:	**Mr. ANBAZHAGAN A**	Receipt Date	:	**30-05-2026 | 11:22:11 am**
Age	:	**62Y / Male**			

Received **Rs.One Thousand Seven Hundred (1700)**___ only from **Mr./ Ms.** ANBAZHAGAN A PATIENT __on the account of / for the purpose of **DIALYSIS BILL** ___ in the mode of **Cash**__ with thanks.

Authorized Signatory

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

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