Vinita HOSPITAL NABH CERTIFIED

Receipt

HR No	:	**4463**	Receipt No	:	**046814**
Patient Name	:	**Mrs. MANGAYAKARASI**	Receipt Date	:	**03-06-2026 | 11:19:12 pm**
Age	:	**77Y 5M / Female**			

Received **Rs.Two Thousand Zero (2000)**___ only from **Mr./ Ms.** MANGAYAKARASI//HEMA MALINI POOVANNAN__on the account of / for the purpose of **h@H bill**___ in the mode of **E-Payment - 387076**__ with thanks.

Authorized Signatory

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

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