Receipt

HR No	:	**4463**	Receipt No	:	**046793**
Patient Name	:	**Mrs. MANGAYAKARASI**	Receipt Date	:	**02-06-2026 | 11:48:25 pm**
Age	:	**77Y 5M / Female**			

Received **Rs.Three Thousand Seven Hundred (3700)** 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 - 283764//444768** with thanks.

Authorized Signatory

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

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