Receipt

HR No	:	**24212**	Receipt No	:	**046784**
Patient Name	:	**Mrs. G. MUTHULAKSHMI**	Receipt Date	:	**02-06-2026 | 05:56:03 pm**
Age	:	**30Y 8M / Female**			

Received **Rs.One Hundred And Fifty-two (152)**__ only from **Mr./ Ms.** G. MUTHULAKSHMI / ATTENDER__on the account of / for the purpose of **ER BILL CLOSED**__ in the mode of **E-Payment - 723307**__ with thanks.

Authorized Signatory

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

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