

## Receipt

|              |   |                            |              |   |                                 |
|--------------|---|----------------------------|--------------|---|---------------------------------|
| HR No        | : | <b>19055</b>               | Receipt No   | : | <b>047712</b>                   |
| Patient Name | : | <b>Mrs. RAJALAKSHMI V.</b> | Receipt Date | : | <b>15-07-2026   12:04:17 pm</b> |
| Age          | : | <b>52Y 3M / Female</b>     |              |   |                                 |

Received **Rs.Four Thousand Six Hundred (4600)**\_\_\_ only from **Mr./ Ms. RAJALAKSHMI V.**\_\_\_ on  
the account of / for the purpose of **dialysis payment**\_\_\_ in the mode of **, Card - 952797**\_\_\_ with  
thanks.

Authorized Signatory

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