Vinita HOSPITAL NABH CERTIFIED

Receipt

HR No	:	**19055**	Receipt No	:	**046822**
Patient Name	:	**Mrs. RAJALAKSHMI V.**	Receipt Date	:	**04-06-2026 | 12:19:32 pm**
Age	:	**52Y 2M / Female**			

Received **Rs.One Thousand Six Hundred (1600)** only from **Mr./ Ms.** RAJALAKSHMI V. on the account of / for the purpose of **x-ray payment** in the mode of **, Card - 107002** with thanks.

Authorized Signatory

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

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