Receipt

HR No	:	**4473**	Receipt No	:	**050157**
Patient Name	:	**Ms. VIJAYA**	Receipt Date	:	**14-11-2026 | 03:07:49 pm**
Age	:	**60Y 9M / Female**			

Received **Rs.Twelve Thousand Three Hundred And Seventeen (12317)** only from **Mr./Ms.** VIJAYA/son on the account of / for the purpose of **after insurance approval ip final payment**

Authorized Signatory

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

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