Receipt

HR No	:	**2322**	Receipt No	:	**050039**
Patient Name	:	**Ms. A.NIRMALA KALYANI**	Receipt Date	:	**09-11-2026 | 05:24:51 pm**
Age	:	**58Y 3M / Female**			

Received **Rs.Three Thousand Two Hundred (3200)** only from **Mr./ Ms.** A.NIRMALA KALYANI/patient on the account of / for the purpose of **dialysis payment** in the mode of **Cash,**

Card - 644483 generated receipt. Therefore, no seal or signature is required.

Authorized Signatory

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