Receipt

HR No	:	**12420**	Receipt No	:	**049972**
Patient Name	:	**Ms. NEELAVATHY M A**	Receipt Date	:	**04-11-2026 | 05:32:17 pm**
Age	:	**50Y 5M / Female**			

Received **Rs.Eighteen Thousand One Hundred And Fifty-three (18153)** only from **Mr./Ms.** NEELAVATHY M A on the account of / for the purpose of **oct26 dialysis payment** in the mode of **Card 190965**.

Authorized Signatory

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

No.70, Josier Street, Nungambakkam, Chennai - 600 034.
P: +91 44 6903 9999, +91 72990 78999
E : info@vinitahealth.com | W : www.vinitahealth.com
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