Receipt

HR No	:	**14286**	Receipt No	:	**050135**
Patient Name	:	**Mr. C.R.RAMASUBRAMANIAN**	Receipt Date	:	**13-11-2026 | 06:42:34 pm**
Age	:	**81Y 11M / Male**			

Received **Rs.Nine Thousand Eight Hundred And Four (9804)** only from **Mr./ Ms.** C.R.RAMASUBRAMANIAN/ attender on the account of / for the purpose of **after insurance approval**

This is a computer generated receipt. No signature required.

Authorized Signatory

Thank you for choosing Vinita Hospital. Get well soon.

Final payment received. Card - 057321

No.70, Josier Street, Nungambakkam, Chennai - 600 034.
P: +91 44 6903 9999, +91 72990 78999
E : info@vinitahealth.com | **W :** www.vinitahealth.com
A unit of Vijay Ganga Speciality Care Pvt. Ltd.