Receipt

HR No	:	**24273**	Receipt No	:	**050069**
Patient Name	:	**Mrs. JAYALAKSHMI**	Receipt Date	:	**10-11-2026 | 03:47:18 pm**
Age	:	**80Y / Female**			

Received **Rs.Eight Thousand Thirty-nine (8039)**___ only from **Mr./ Ms.** JAYALAKSHMI__on the account of / for the purpose of **er charges**___ in the mode of **E-Payment - 661874**__ with thanks.

Authorized Signatory

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

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