Receipt

HR No	:	**24273**	Receipt No	:	**050021**
Patient Name	:	**Mrs. JAYALAKSHMI**	Receipt Date	:	**07-11-2026 | 04:57:43 pm**
Age	:	**80Y / Female**			

Received **Rs.Three Thousand Two Hundred And Fourty-five (3245)** only from **Mr./ Ms.** JAYALAKSHMI/ATTENDER on the account of / for the purpose of **DIALYSIS PAYMENT** in the mode of **E-Payment - 652678/Received on 5th**, vide Transaction.

Authorized Signatory

This is a computer 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
A unit of Vijay Ganga Speciality Care Pvt. Ltd.