Receipt

HR No	:	**26248**	Receipt No	:	**050145**
Patient Name	:	**Ms. PARIMALA DEVI A**	Receipt Date	:	**13-11-2026 | 09:14:02 pm**
Age	:	**71Y 1M / Female**			

Received **Rs.One Thousand Zero (1000)**__ only from **Mr./ Ms.** PARIMALA DEVI A__on the account of / for the purpose of **H@H payment**__ in the mode of **E-Payment - 051908**__ with thanks.

Authorized Signatory

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

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