Receipt

HR No	:	**15690**	Receipt No	:	**049928**
Patient Name	:	**Ms. PREMALATHA G**	Receipt Date	:	**02-11-2026 | 04:16:44 pm**
Age	:	**48Y 4M / Female**			

Received **Rs.Four Thousand Five Hundred And Ninety-nine (4599)** only from **Mr./ Ms.** PREMALATHA G on the account of / for the purpose of **dialysis payment** in the mode of **Card - 238362/228576** receipt thereof.

Authorized Signatory

Thanks, therefore, no seal or signature is required.

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