Vinita HOSPITAL NABH CERTIFIED

Receipt

HR No	:	**24133**	Receipt No	:	**046735**
Patient Name	:	**Mrs. P. MANIMEGALAI**	Receipt Date	:	**31-05-2026 | 10:24:54 am**
Age	:	**62Y / Female**			

Received **Rs.Thirty Seven Thousand Eight Hundred And Fifty-seven (37857)**__ only from **Mr./ Ms.** P. MANIMEGALAI attender __on the account of / for the purpose of **ip final bill**__ in the mode of **Cash**__ with thanks.

Authorized Signatory

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

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