# Receipt

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|---|---|---|---|---|---|
| HR No | : | **694** | Receipt No | : | **050018** |
| Patient Name | : | **Mr. JACKO** | Receipt Date | : | **07-11-2026 \| 03:33:10 pm** |
| Age | : | **44Y 8M / Male** | | | |

Received **Rs.Two Thousand Eight Hundred (2800)** only from **Mr./ Ms.** JACKO/patient on the account of / for the purpose of **DIALYSIS PAYMENT** in the mode of **E-Payment - 233581**

Authorized Signatory

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

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