Receipt

HR No	:	**10643**	Receipt No	:	**047517**
Patient Name	:	**Mr. R. SHANMUGHAM**	Receipt Date	:	**07-07-2026 | 08:50:54 am**
Age	:	**76Y 3M / Male**			

Received **Rs.One Thousand Two Hundred And Fifty (1250)** only from **Mr./ Ms.** R. SHANMUGHAM PATIENT on the account of / for the purpose of **H@H PAYMENT** in the mode of **Cash** with thanks.

Authorized Signatory

This is a system-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.