Vinita HOSPITAL NABH CERTIFIED

Receipt

HR No	:	**24217**	Receipt No	:	**046815**
Patient Name	:	**Mr. C.NAVIN CHANDAR**	Receipt Date	:	**04-06-2026 | 04:33:38 am**
Age	:	**61Y / Male**			

Received **Rs.Five Thousand Seventeen (5017)**__ only from **Mr./ Ms.** C.NAVIN CHANDAR__on the account of / for the purpose of **IP FINAL BILL**__ in the mode of **E-Payment - 339805**__ 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.