Receipt

HR No	:	**4643**	Receipt No	:	**046775**
Patient Name	:	**Mr. PRAKASHMAL BHANDARI**	Receipt Date	:	**02-06-2026 | 03:06:14 pm**
Age	:	**95Y / Male**			

Received **Rs.Five Hundred And Zero (500)**__ only from **Mr./ Ms.** PRAKASHMAL BHANDARI / ICU STAFF ABI__on the account of / for the purpose of **H@H**__ 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.