Receipt

HR No	:	**1790**	Receipt No	:	**050034**
Patient Name	:	**Mrs. DHARANI PRASAD**	Receipt Date	:	**09-11-2026 | 12:01:39 pm**
Age	:	**70Y 10M / Female**			

Received **Rs.Two Thousand Eight Hundred (2800)** only from **Mr./ Ms.** DHARANI PRASAD on the account of / for the purpose of **dialysis payment** in the mode of **, Card - 462280** with thanks.

Authorized Signatory

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

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