Receipt

HR No	:	**17326**	Receipt No	:	**050006**
Patient Name	:	**Mr. SUNDARESAN S**	Receipt Date	:	**07-11-2026 | 10:54:13 am**
Age	:	**73Y 9M / Male**			

Received **Rs.Twenty Thousand Five Hundred And Fifty (20550)** only from **Mr./ Ms.** SUNDARESAN S/patient on the account of / for the purpose of **sep mount -26 dialysis pending**

payment completed Thank you. Please acknowledge receipt. **Card 868568**

Authorized Signatory

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