

## Receipt

|              |   |                     |              |   |                          |
|--------------|---|---------------------|--------------|---|--------------------------|
| HR No        | : | 100                 | Receipt No   | : | 047214                   |
| Patient Name | : | Mr. SHEIGER KANNIAH | Receipt Date | : | 22-06-2026   03:41:44 pm |
| Age          | : | 74Y 8M / Male       |              |   |                          |

Received **Rs.Two Thousand Eight Hundred (2800)**\_\_\_ only from **Mr./ Ms. SHEIGER KANNIAH** patient\_\_\_ on the account of / for the purpose of **dialysis bill**\_\_\_ in the mode of **, Card - 835114**\_\_\_ with thanks.

Authorized Signatory

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