

## Receipt

|              |   |                            |              |   |                                 |
|--------------|---|----------------------------|--------------|---|---------------------------------|
| HR No        | : | <b>9632</b>                | Receipt No   | : | <b>048131</b>                   |
| Patient Name | : | <b>Mrs. PURANASUNTHARI</b> | Receipt Date | : | <b>03-08-2026   10:48:27 pm</b> |
| Age          | : | <b>30Y 8M / Female</b>     |              |   |                                 |

Received **Rs.Five Thousand Eight Hundred And Ninety-five (5895)**\_\_\_ only from **Mr./ Ms.**  
**PURANASUNTHARI / ATTENDER**\_\_\_ on the account of / for the purpose of **ER BILL CLOSED**\_\_\_ in the  
mode of **, Card - 983444**\_\_\_ with thanks.

Authorized Signatory

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