Receipt

HR No	:	**11601**	Receipt No	:	**050112**
Patient Name	:	**Ms. SHAKILA CR**	Receipt Date	:	**12-11-2026 | 03:50:11 pm**
Age	:	**60Y 10M / Female**			

Received **Rs.Three Thousand Two Hundred (3200)**__ only from **Mr./ Ms.** SHAKILA CR__on the account of / for the purpose of **ip advance payment**__ in the mode of **, Card - 164758**__ with thanks.

Authorized Signatory

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

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