

**DEPOSIT RECEIPT**

**UHId** : RAJH.16062564  
**Patient Name** : Mr. ANUKRIT SINGH

**Receipt No** : MTRDP1550  
**Receipt Date** : 04/07/2019 02:18 pm

SI.No	Mode of Payment	Amount(Rs.)
1	Cash	1000.00

**Total Amount Rs. : 1000.00**

Amount in words Rs. one thousand only

Received with thanks from Mr. ANUKRIT SINGH  
on account of Mr. ANUKRIT SINGH

**Payment Mode (s)**

Cash for 1000.00

Cashier  
anshul