



SIVA HOSPITALS

MINIMAL ACCESS SURGICAL CENTRE
234/A1, EATHAMOZHI ROAD, VAITHIYANATHAPURAM,
KOTTAR, NAGERCOIL-629 002.
Tel.:04652 240911, Mob : 8973627272

S.NO. :

478

Date : 10.06.2021

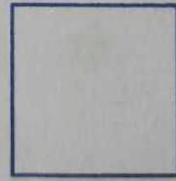
RECEIPT

Received with thanks from Mr. / Ms. Saraswathy

a sum of Rupees Two lakh Thirty Thousand three hundred
and eighty four Only

towards Hospitalisation / Treatment / Surgery / Other Charges.

₹ 230384/-




For SIVA HOSPITALS
[Signature]
Authorised Signatory

SIVA HOSPITAL
VAITHIYANATHAPURAM, KOTTAR
KANYAKUMARI DIST - 629002

CASH BILL

Patient: **Mrs.SARASWATHY (40/F)**

RegDate:30.05.2021

Ref.Dr: Dr.T.SivakumarMS.,Dip(Lap)

Bill Date:30.05.2021

Test	Amount
UREA	100.00
CREATININE	100.00
CBC	550.00
CRP	450.00
LFT	600.00
FERITTIN	850.00
IL-6	3100.00
D-DIMER	1300.00
Bill Amount	7050.00





SIVA HOSPITAL
VAITHIYANATHAPURAM, KOTTAR
KANYAKUMARI DIST - 629002

CASH BILL

Patient: **Mrs.SARASWATHY (40/F)**

RegDate:25.05.2021

Ref.Dr: Dr.T.SivakumarMS.,Dip(Lap)

Bill Date:25.05.2021

Test	Amount
UREA	100.00
CREATININE	100.00
CBC	550.00
CRP	450.00
LFT	600.00
LDH	400.00
FERITTIN	850.00
IL-6	3100.00
D-DIMER	1300.00
RBS	50.00
Bill Amount	7500.00





ORIGINAL

PRANAV DIAGNOSTIC CENTRE


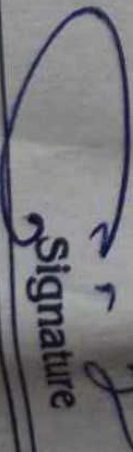
85-D, WATER TANK ROAD, DUTHIE SCHOOL JUNCTION, NAGERCOIL-1. Ph.: 04652-226765

Bill No. 9725

Date: 24/5/24

To

Mrs. G. A. S. S. S.

Date	Particulars	Amount
	<div style="text-align: center;">  1 Cash <div style="border: 1px solid black; width: 100px; height: 30px; margin: 5px auto;"></div> </div>	3500/-
sum of rupees <u>Three thousand five hundred</u>		
RS. 3500/-		
for Pranav Diagnostic Centre <div style="text-align: center;">  Signature </div>		

for Pranav Diagnostic Centre

Signature _____