

REGIONAL CANCER CENTRE

POST BOX. NO. 2417
MEDICAL COLLEGE CAMPUS
THIRUVANANTHAPURAM - 695 011
KERALA STATE



Phone : 2442541 (PABX)

Fax : 91 : 0471 : 2447454

Grams : CANCEMENT

DATE :

EXPENDITURE CERTIFICATE

Patients Name :

Address :

Age :

CR No. :

Date of Registration :

Diagnosis :

Approximate period
of treatment :

Approximate expenditure
for investigation /
Radiotherapy/Surgery/
Chemotherapy/Hospital stay/
Supportive care etc. :

Remarks :

Name & Designation
of the medical officer :

Signature :

An autonomous centre sponsored for Cancer Research & Treatment by Government of India and Govt. of Kerala. Donations to the Centre are exempt under Section 80-G and (i) (ii) of the I.T.Act.1961.