

Paid

SOLD BY

Demo Hospital

55-A5, h839



INVOICE

BILLING ADDRESS

hospital customer

Ph: 9898987676

Invoice No: DEM_5

Date: 2026-04-14

1	df	78	0.000	0	0.000	0
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AMOUNT IN WORDS

Zero Rupees Only

Sub Total ₹0.000

Rounded Off 0

Grand Total ₹0.000

Payment Cash

This is a computer-generated invoice. No signature required.

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