

Paid

SOLD BY
Demo Hospital
55-A5, h839



INVOICE

BILLING ADDRESS

hospital customer

Ph: 9898987676

Invoice No: DEM_15
Date: 2026-04-15

1	jk	878	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.