Paid

SOLD BY
Demo Hospital
55-A5, h839

INVOICE

BILLING ADDRESS

hospital customer

Ph: 9898987676

Invoice No:DEM_20
Date:2026-04-15

#	DESCRIPTION	QTY	MRP	DISC	PRICE	TOTAL
1	jk	878	0.000	0	0.000	0

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.