

Unpaid

SOLD BY  
Demo Hospital  
55-A5, h839



## INVOICE

BILLING ADDRESS  
**hospital customer**

Ph: 9898987676

Invoice No: DEM\_31  
Date: 2026-04-18

#	DESCRIPTION	QTY	MRP	DISC	PRICE	TOTAL
AMOUNT IN WORDS						
Twelve Thousand Rupees Only						
Sub Total						₹0.000
Rounded Off						0
<b>Grand Total</b>						<b>₹12,000.000</b>
Payment						Cash

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