

Unpaid

SOLD BY
Demo Hospital
55-A5, h839



INVOICE

BILLING ADDRESS
hospital vendor

Ph: 6787875656

Invoice No: DEM_32
Date: 2026-04-18

#	DESCRIPTION	QTY	MRP	DISC	PRICE	TOTAL
AMOUNT IN WORDS						
Ten Thousand Eight Hundred Rupees Only						
Sub Total						₹0.000
Rounded Off						0
Grand Total						₹10,800.000
Payment						Cash

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