



GAURAV STAR LINKER

310/8 KRISHNA COLONY, BHIWANI-1207021 (HARYANA)
Mobile no- 9416059027

To: DCDC KIDNEY CARE BHIWANI

Invoice No :2024-25/10/01

Billing Date :01/10/2024

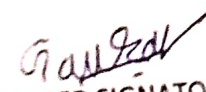
Mode of Payment :CASH

S.NO.	Description of Goods	HSN/SAC	Qty.	Unit	Price	Amount Rs.
1	Gold Plan		2		250.00	500.00
Sub Total						500.00

FIVE HUNDRED ONLY

Terms & Conditions
E. & O.E.
1. THIS IS COMPUTER GENERATED BILL HENCE
NO SIGNATURE REQUIRED.
2. Interest @ 18% p.a. will be charged if the payment
is not made within the stipulated time.
Subject to 'Haryana' Jurisdiction only

FOR GAURAV STAR LINKER


AUTHORISED SIGNATORY