

S.NO.

GAURAV STAR LINKER

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

To: DCDC KIDNEY CARE BHIWANI

Description of Goods

Invoice No :2023-24/10/01

Billing Date :01/10/2023

Mode of Payment :CASH

Qty. Unit

	acacillation of goods	HSN/SAC	Qty.	11-14		
		,	Qty.	Unit	Price	Amount Rs.
	Gold Plan		2			
			2		250.00	500.00
		CKIDVEY				
					16	
=		* (BHIVANI)*				
	\	8				
		* BHIVANI *			Sin P	
				Sub To	otal	500.00
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E HUNDREI	JUNLI					=0

HSN/SAC

Terms & Conditions

E. & O.E.

1. THIS IS COMPUTER GENRATED BILL HENCE NO SIGNATURE REQUIRED.

2. Interest © 18% p.a. will be charged if the payment Is not made with in the stipulated time.

3. Subject to 'Haryana' Jurisdiction only

FOR GAURAV STAR LINKER

AUTHORISED SIGNATORY