

GAURAV STAR LINKER

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

To: DCDC KIDNEY CARE BHIWANI

Invoice No :2023-24/09/01

Billing Date :01/09/2023

Mode of Payment :CASH

S.NO.	Description of Goods	HSN/SAC	Qty.	Unit	Price	Amount Rs.
1	Gold Plan		2		250.00	500.00
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		(8)	KIDNEY C			
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			WIL HOS	Sı	ub Total	500.00

FIVE HUNDRED ONLY

Terms & Conditions

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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