ESTIMATE

Sold to/ क्रेता .....

.....

No./ क्रमांक ..... Dated.....

QTY. संख्या	PARTICULAR विवरण	RATE दर	AMOUNT Rs.	P.
1	Clean 1"		30	
2	T 1"		80	
1	Union 1"		10	
2	Socket 1"		40	
1	Bush 1"×½		30	
1	Bush 1"×¾		30	
1	Reducer 1"×¾		150	
1	Elbow ¾"		20	
1	PTA ¾		50	
		TOTAL		

UCDC KIDNEY CARE NOIDA UCDC YAMUNA HOSPITAL

Thank You धन्यवाद

E.&.O.E. भूल चूक लेनी देनी Guruji Signature

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ESTIMATE

Sold to/ क्रेता .....

.....

No./ क्रमांक ..... Dated 15/10/24

QTY. संख्या	PARTICULAR विवरण	RATE दर	AMOUNT Rs.	P.
1	[illegible]	20		
	1 [illegible]	20		
	1 [illegible]	20		
	1 [illegible]	100		
	1 [illegible]	150		
	1 [illegible]	20		
	Thank You धन्यवाद	TOTAL		

DCDC KIDNEY CARE NOIDA
15/10/24

E.&.O.E. भूल चूक लेनी देनी Guruji Signature

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