HOLISTIC ONCOCARE CENTRE

A Unit of Ajeya Kumar Memorial Health Care LLP

The Breast Clinic

Unit 414, ATL Corporate Park,
Saki Vihar Road, Powai,
Mumbai - 400072
Phone: +91 8450990078

Invoice

Invoice No: 252600731
Patient Name: Ms. Kawaljit Kaur/PW/2526/00017
Pay Mode: UPI

Invoice Date: 23-07-2025
Doctor: Dr. Namita Pandey

Sr.No.	TREATMENT	AMOUNT
1	Chemoport Flushing Charges	2000.00
2	10cc Syringe	11.00
3	Chemoport needle	799.00
4	100 ml NS	22.00

Total Amount: 2832.00
Less Discount (-): 0.00
Grand Total: 2832.00
Received Amount (-): 2832.00
Balance Amount: 0.00

This is a computer generated invoice hence no signature is required