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: 252601285
Patient Name: Ms. Priya Potekar/PW/2526/00303
Pay Mode: Card

Invoice Date: 04-10-2025
Doctor: Dr. Namita Pandey

Sr.No.	TREATMENT	AMOUNT
1	Chemoport Flushing Charges	2000.00
2	Chemport Niddle	799.00
3	10cc Syringe	11.00
4	Gauze	50.00
5	saline 100ml	22.00

Total Amount: 2882.00
Less Discount (-): 0.00
Grand Total: 2882.00
Received Amount (-): 2882.00
Balance Amount: 0.00

This is a computer generated invoice hence no signature is required