M/S MAHIMA MEDICARE

ORTI, BAGHUNI, NEMALA, CUTTACK Phone: 9348221721 License No: CU-VI46219/R, 42220/RC, 20123RX GSTIN: 21AXRPN9340C1ZH | State Code: 21

INVOICE

| Invoice Number: | INV-2025-09-32178 |
|-----------------|-------------------|
| Invoice Date: | 19 September 2025 |
| Payment Status: | PAID |

BILL TO:

patent1

Email: dubeysuman2712@gmail.com

Phone: 9311293172

Address: ab

| Description | Qty | Unit Price | Total |
|-------------------------------|-----|------------------|------------------|
| Medical Consultation - Dr. d1 | 1 | 1 ,000.00 | 1 ,000.00 |

| Subtotal: | ■1,000.00 |
|---------------|------------------|
| TOTAL: | 1 ,000.00 |

Terms & Conditions: Payment is due within 30 days. Thank you for your business!

Thank you for your business!
Generated on 19 September 2025 at 10:03 AM