



Faiz Clinic

Mill Corner, Aurangabad, Maharashtra, India
Contact: 9898989898

Invoice Details:

Invoice Number: INV-2799
Issue Date: Thu Mar 06 2025
Due Date: Thu Mar 06 2025
Payment Status: unpaid
Payment Method: card
Notes: asadsadasdasds

Patient and Appointment Details:

Patient Name: 679db5ae89f47aac9d5fee1f
Appointment Date: Wed Mar 05 2025
Time: 15:59 - 15:59
Reason:
Status: scheduled

Items Details:

Description	Quantity	Unit Price	Total
ttttttt	5	'20.00	'100.00
ssssssss	1	'20.00	'20.00
Tax: '100.00			
Discount: '90.00			
Total Amount: '130.00			

Thank you for your business!