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Invoice

Invoice Number	Date
FXH2023003	02-08-2023

Customer Information

Customer ID	Customer Name
OFJ62863667	Sharon Ragbansingh

Invoice Details

Description	Unit Price
Advance Payment	2500

Payment Summary

Total:	2500
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Payment Details

Payment Method:	UPI
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For any inquiries or questions, please contact us at (+91) 8097090308 / 8097653705 or hospitalfeenixx@gmail.com.

Thank you !