



Regd No. 78/2020

SRIVEN ENVIRON TECHNOLOGIES
6/1/691 Kovur nagar, Anantapur,515002.
Email: tashok106@gmail.com

Cell : 9573489997
Cell : 9182726701
PAN : ACNFS7889L

BMW Invoice
September-2020

For Hospital

Hospital Name : Anu Dental Clinic**Hospital Type** : Dental hospital**Address** : Dharmavaram Phone no: 9963756358**Invoice No** : 2020/9/646**Date** :30-9-2020**BMW charges per month** : 500**Billed Amount**: 500**In Words**: Five Hundred Rupees Only**Remarks**:**Info**:Account summery for September-2020

Hospital Name	Prev Balance	BMW charges	Total Amount
Anu Dental Clinic	0	500	500

Bank Details: AC:0659201002049 IFSC Code: CNRB0000659 | CFMS A/c no: 1000268011 | Anantapur Main Branch

Customer Signature

Subject to jurisdiction Only

Authorised Signature



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BMW Invoice
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For Office

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