

## SRIVEN ENVIRON TECHNOLOGIES

6/1/691 Kovur nagar, Anantapur,515002.

Email: tashok106@gmail.com

For Hospital

Cell: 9573489997

Cell: 9182726701

PAN: ACNFS7889L

**BMW Invoice** Regd No. 78/2020 September-2020

Hospital Name: P.S Childrens Hospital

**Hospital Type**: Clinic Address: Guntakal

**Invoice No**: 2020/9/576

**Date**:30-9-2020

**BMW** charges per month: 1500 **Billed Amount**: 1500

**In Words:** One Thousand Five Hundred Rupees Only

Remarks:

**Info:**Account summery for September-2020

Hospital Name	Prev Balance	BMW charges	Total Amount
P.S Childrens Hospital	0	1500	1500

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

Main Branch

Customer Signature Subject to jurisdiction Only Authorised Signature

Regd No. 78/2020

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Cell: 9182726701 PAN: ACNFS7889L

For Office

Cell: 9573489997

**BMW Invoice** 

September-2020

**Invoice No**: 2020/9/576

**Hospital Name**: P.S Childrens Hospital

**Address**: Guntakal

Date: 30-9-2020

**BMW** charges per month: 1500

**Billed Amount**: 1500

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