

## SRIVEN ENVIRON TECHNOLOGIES

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

Email: tashok106@gmail.com

For Hospital

Cell: 9573489997

Cell: 9182726701

PAN: ACNFS7889L

**Invoice No**: 2020/9/93

**Date**:30-9-2020

Cell: 9573489997

Cell: 9182726701

PAN: ACNFS7889L

BMW Invoice September-2020

Hospital Name: Kriya health care center

Hospital Type : Clinic

Address: Sai nagar 2 nd cros, Besides Dento Detal clinic, ATP

BMW charges per month: 1000 Billed Amount: 1000

2.1211 viim 800 PV2 11101111 1 2000

In Words: One Thousand Rupees Only

Remarks:

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

<b>Hospital Name</b>	Prev Balance	BMW charges	Total Amount
Kriya health care center	0	1000	1000

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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BMW Invoice

September-2020 For Office

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