

## SRIVEN ENVIRON TECHNOLOGIES

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

Email: tashok106@gmail.com

For Hospital

**Invoice No**: 2020/9/486

Cell: 9573489997

Cell: 9182726701

PAN: ACNFS7889L

BMW Invoice

September-2020

Hospital Name: Care dental clinic, Tadipatri

**Hospital Type** : Clinic **Address** : Tadipatri

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
Care dental clinic, Tadipatri	500	500	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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