

Invoice To:

HOPE HOSPITAL (**Corporate**)
HOPE NEUROCARE HOSPITAL ELLISBRIDGE PALDI AHMEDABAD
PALDI, Ahmedabad, GUJARAT

Booking & Invoice

Invoice No.: INV202413
Date Issues: 09/10/2024
Service Period: 02/09/2024 To 03/09/2024
Invoice Start Date: 02/09/2024
Invoice End Date: 02/09/2024

SR NO.	DESCRIPTION	PRICE	DAYS/QTY	TOTAL
1	BABY CARE (Day Shift)	₹500	1	₹500

Signature:

Subtotal: ₹500
Total: ₹500