

INVOICE

Invoice No: INV-343889Invoice Date: 4/12/2024Status: New

Name:Payment: Cash

Address:Sold By: Admin

Mobile:

Sl.	Item Name	Quantity	Unit Price	Discount	Amount
1	Maxpro	NaN	2.00	0	NaN

Gross Amount:280.00

Discount (ABS):0

Tax Amount:0.00

Net Amount:280.00

Paid Amount:280.00

Due Amount:0.00

Authorized SignatureCustomer Signature

EMON DENTAL.

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