

# TrueMedicine

## Payment Invoice

Invoice Date: 12/3/2025

Invoice Number: INV-67d15830e4e4815199b531ce

Doctor Name: Dr. Shivendra jha

Bank Name:

Account Number: \*\*\*\* \* 5512

IFSC Code:

Approved Amount: 11000

Payment Mode: UPI

Transaction ID: 1226256562658

Payment Date: 12/3/2025

Admin Signature: \_\_\_\_\_

Official Stamp: \_\_\_\_\_