

MR NAME: Abhishek Geno

MR EMAIL: a@a

MESSAGE: PLEASE CLEAR YOUR OUTSTANDING

S.No	Party Name	Bill Number	Bill Date	Bill Amount
1	AKASH ENT	T00001	02/04	29999
2	SURG ENT	T000023	5/6	3200
3	AWADH SURGICALS	T00024	02/07	5600
4	AWADH SURGICALS	T00025	03/07	6500

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