Name: Varun Tayur Invoice No. BLR /

Address: 917/a, 1st F Main, Girinagar 2nd Phase, Bangalore 560085

Bill To:

Nightingales Medical Trust

Kasturinagar

Bangalore- 560 043

|  |  |  |  |
| --- | --- | --- | --- |
| **Sl. No** | **Description** | **Rate( Rs)** | **Amount** |
| 1 | Professional fee  (Training on 09-Nov-2024) | 2000/- | 2000/- |
| **TOTAL** | | | **2000/-** |

(Rupees: Two Thousand Rupees Only)

PAN NO: AFXPT4012K

Signature : A question mark and a question mark

Description automatically generated