

INVOICE

Invoice No. – AHPL/KR/24-25/02

Date – 14-06-2024

To,
KRISUMI CORPORATION PRIVATE LIMITED,
3RD FLOOR, CENTRAL PLAZA MALL, DLF GOLF COURSE ROAD,
SECTOR 53, Gurugram,
Pin Code – 122002, Haryana

Subject – Submission of Bill for the Dated 07-06-2024.

S.NO	Particulars	Price	Hrs.	Net Amount
1	Ambulance Charge With One Assistant	1000	06	6,000.00
Total Amount				6,000.00

Total Amount to be paid INR – 6,000.00/- (Rupees Six Thousand Only.)

Kindly acknowledge the receipt of same and RTGS in the favor of Aarvy Healthcare Private Limited.

Note –

1. Any Dispute/discrepancy notice in the bill enclosed should be brought to our notice a week from the date of receiving the bill.
2. PAN of the hospital is AAOCA5628F.

Bank Details – HDFC BANK

Beneficiary Name – Aarvy Healthcare Private Limited

Account No. – 50200079420662

IFSC Code – HDFC0008205

Branch – HDFC BANK LTD G 149,F 244,SAPPHIRE 90,SECTOR 90, GURUGRAM-122505, HARYANA

Thank You

For Aarvy Healthcare Private Limited



Authorized Signatory

Aarvy Healthcare Pvt. Ltd.

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✉ Email: info@aarvyhealthcare.com 🌐 www.aarvyhealthcare.com

Not applicable for medico legal purpose

CIN: U85300HR2016PTC064899