



**HOLISTIC  
ONCOCARE  
CENTRE**

A Unit of Ajeya Kumar Memorial Health Care LLP

## The Breast Clinic

Unit 414, ATL Corporate Park,  
Saki Vihar Road, Powai,  
Mumbai - 400072  
Phone: +91 8450990078

### Invoice

**Invoice No:** 252600802  
**Patient Name:** Ms. Maya Deb/PW/2526/00852  
**Pay Mode:** Card

**Invoice Date:** 31-07-2025  
**Doctor:** Dr. Deep Vora

Sr.No.	TREATMENT	AMOUNT
1	Consultation	1500.00

**Total Amount: 1500.00**

**Less Discount (-): 0.00**

**Grand Total: 1500.00**

**Received Amount (-): 1500.00**

**Balance Amount: 0.00**

This is a computer generated invoice hence no signature is required