



**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:** 252602229  
**Patient Name:** Ms. Kawaljit Kaur/PW/2526/00017  
**Pay Mode:** UPI

**Invoice Date:** 23-01-2026  
**Doctor:** Dr. Namita Pandey

Sr.No.	TREATMENT	AMOUNT
1	Chemoport Flushing Charges	2000.00
2	Chemoport Needle	799.00
3	Gauze	50.00
4	10cc Syringe	18.00
5	100ml Saline	47.00

**Total Amount: 2914.00**

**Less Discount (-): 0.00**

**Grand Total: 2914.00**

**Received Amount (-): 2914.00**

**Balance Amount: 0.00**

This is a computer generated invoice hence no signature is required