



**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: 252602531
Patient Name: Ms. Indumati Shetty/HOC/2512/01227
Pay Mode: Card

Invoice Date: 20-02-2026
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