



**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: 252602915
Patient Name: Ms. Shivani Patel/HOC/2603/01486

Invoice Date: 31-03-2026
Doctor: Dr. Suman Kumar
Ankathi

Pay Mode: Card

Sr.No.	TREATMENT	AMOUNT
1	Tomomammography - Bilateral	5630.00

Total Amount: 5630.00

Less Discount (-): 0.00

Grand Total: 5630.00

Received Amount (-): 5630.00

Balance Amount: 0.00

This is a computer generated invoice hence no signature is required