PROFORMA INVOICE



Event ID: 12207 BILL DETAILS

Event Date: 2025-04-01 **Invoice ID:** DMHHC/2024-2025/10891

PATIENT DETAILS

Name: Sane Mangala

Mobile:2025395510

Residential Address: Chintamani Residency, Lake Town Rd, Shree Mahalaxmi Nagar, Chaitraban,

Mahalaxmi Nagar, Katraj, Pune, Maharashtra 411037, India

Permanent Address: C-14, Chintamani Residency, Opp. Mahalaxminagar, Chaitraban, Bibwewadi,

Pune 411 037

SERVICE DETAILS

Service: Healthcare attendants

Sub Service: Healthcare Attendant - 10 Hours

Professional Name	Sessions	Start Date	End Date	Amount
Mahananda Sachin Ajetrao	30	01-04-2025	30-04-2025	₹30000

Discount Value ₹: 11250

Final Amount (INR): ₹18750

Received Amount (INR): ₹0

Declaration:

We declare that this Bill shows the actual price of the services described and that all particulars are true and correct.

Company's Bank Detail:
Bank Name: HDFC BANK

IFSC Code: HDFC000007

Branch: Bhandarkar Road
Account: 50200010027418

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