



INVOICE



VDL26-27/646

To

MUTHU HOSPITALS Pvt Ltd
336, Paper Mills Road, PERAMBUR, CHENNAI -
600011.
GST IN:33AAQCM7085G1Z2.

Invoice No: VDL26-27/646

Invoice Date: 30-May-26

Ord.No./Date	O.Form.No	Product Name	Notation		HSN Code	Units	Rate	Total(₹)
VDL26-27/5015 16-May-26		DMLS			90212100	13	1,000.00	13,000.00
Consultant :		Patient:SELVI	6 5 4 3 2 1	1 2 3 4 5 6 7				

	TOTAL UNITS	13	
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	Taxable Amount	12,382.00
	CGST@2.5%	309.52
	SGST@2.5%	309.52
	Total Amount	13,000.00

Total Net Amount in words: Rupees Thirteen Thousand only.

Round off **Net Amount()** **13,000.00**

Bank Details

NAME : VINAYAGA DENTAL LAB

BANK NAME : ICICI BANK

ACCOUNT NO: 603605015227

IFSC : ICIC0006036

BRANCH : EGMORE.

Accounts Department No-1 :7550066982.

Accounts Department No-2 :8608692987.



[REQUEST YOU TO MAKE THE PAYMENT WITHIN 15 DAYS FROM THE DATE OF BILL GENERATE]

For VINAYAGA DENTAL LAB

Authorised Signatory

This is the computer generated invoice.