



PRAFORMA INVOICE

ORIGINAL/DUPLICATE

ADROIT IBS PI F-114, INDRALOK ARCADE, TALAV GATE, JUNAGADH, GUJARAT. PIN - 362001				DEBIT MEMO	
PH: 97126 77357, 98242 64564, 99255 89279 GSTIN:				PI NO.	
e-Mail : info@adroit-ibs.com,adroitibsjnd@gmail.com				23	
M/S : HANUMANT MEDICAL				25	
Add.: GROUND FLOOR, DIXA NAGAR, NR ZANZRDA CHOK City: JUNAGADH State & Code 24-Gujarat GSTIN:				DATED 01/04/2025	
No	Particulars	Qty.	R	ate	Amount
1	LIC.KEY FOR UPGRADE VERSION SOFTWARE AIBS_MEDICAL FY 2025-26	1		2000.00	2000.00
In Words: Rs. Two Thousand Only.			Net An	nount	2000.00
Terms	Detail: Name: A/C No: IFSCode: & Condition re price includes Modifications, Online Training & Renewal Charges for the first f	inancial year. Subse	equently. t	 hese	

- 2:By Installing our Software/Acceptance of this invoice, you confirm and accept to our Standard Licensing Agreement & terms and conditions prevailing in the state/country.
- **3:**Our Software installed in your system is on lease and for the use of end user only. The software is Single Licence Version and is neither Non-Returnable nor Non-Transferable.
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ADROIT IBS PI

Authorised Signature