



Nirvasa Healthcare Pvt. Ltd

Plot No.- 404-405, Phase III, Udyog Vihar III, Sector 20, Gurugram, Haryana 122016 Email:info@nirvasa.com | Contact:1244811144

| ORDER ID | Invoice Ref | Order Date |
|--------------|--------------|---------------------|
| 111100262198 | 111100262198 | 2025-03-17 05:12:55 |

| Buyer/Consignee/To | Transporter Name | Payment Details | |
|---|---------------------|-------------------------|------|
| Anoop | | Payment method : | COD |
| 32,kapashera border,Primary School, North | | Gross Amount (INR) : | 1478 |
| East Delhi, Delhi, Ph:9416071314 | | Discount Amount (INR) : | 0 |
| | | Payable Amount (INR) : | 1478 |
| | | Balance Due (INR) : | 0 |
| | | Box Quantities : | 1 |

| Content Description | | Qty | Price |
|---------------------|-------------------------|-----|-------|
| | Gross Amount (INR) : | | 1478 |
| Shadav | Discount Amount (INR) : | | 0 |
| Pharmacist | Shipping : | | Free |
| DL: 123456789; | Payable Amount (INR) : | | 1478 |

Disclaimer

Subject to the conditions of carriage, which limit the liability of the Logistics Service Provider for any loss, delay or damage the shipment. Visit to view the conditions of carriage and other terms.

The Seller mentioned above, by way of Seller Agreement signed with undertakes that it will always supply genuine product with adequate Invoice, warranty cards or other paperwork (as applicable) that are required to establish valid proof of purchase by Buyer to Manufacturer of above product. Buyer is advised to retain Seller Invoice for records. assumes no responsibility of genuinity of product, its effectiveness, after sales service, warranty etc.