

	GST TAX INVOICE SHREE SAI MEDICAL Ap TURKABAD KHARADI TQ. GANGAPUR DIST AURANGABAD	GST No. : . DI. No. : 122328, 122329 PH. No. : 7040707330 Email : shreesaipharma.05@gmail.com
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Patient Name : SONALI PATEKAR				Invoice No. : AM/C119/25/15787						
Dr. Name : DR. RELAN SIR				Inv. Date : 02-04-2025						
Patient No. : 9763377412				Pat. Address : SHEDSHAL						

Product	HSN	B.No	Exp.	Qty	Pack	MRP	Gross	Disc	GST	Net
MPX CV KID TAB - Het	30044030	BT24058 6	10/25	6.00	1 x 6	40.25	35.94	0.00	12.00	40.25
MOSI D EYE DROP -	30044030	344H013	01/26	1.00	5 ML	32.89	29.37	0.00	12.00	32.89
MONTINA L SYP - ARI	30044030	MTN240 17	03/26	1.00	30 ML	50.00	44.64	0.00	12.00	50.00
CALPOL 250 PAED SUSPENSION - GSK	30044030	NA538	08/26	1.00	60 ML	45.02	40.20	0.00	12.00	45.02
MEFTAL-P TAB - BLU	30044030	HMP243 8	09/27	10.00	1 x 10	35.00	31.25	0.00	12.00	35.00
BETNOVATE C - GSK	30044030	U62D	06/26	1.00	30 GM	70.85	63.26	0.00	12.00	70.85

Amt. In Words : TWO HUNDRED AND SEVENTY-FOUR RUPEES ONLY Credit Bal. : 274.00 Terms & Conditions 1. Medicine return shall be done within 7 days of purchase. 2. Cut strips, Refrigerated, OTC/FMCG shall not be refunded/exchanged. 3. No return/Exchange will be processed without presenting the original bill.	GROSS 244.66 DISCOUNT 0.00 TAX 29.35 NET AMT. 274.00
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SHREE SAI MEDICAL Ap TURKABAD KHARADI TQ. GANGAPUR DIST AURANGABAD Customer Care : 7040707330	REG. PHARMCIST SIGN SANDEEP SHIVNATH AGALE
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Get Well Soon !!!