PAPERLESS PHARMACY

GST TAX INVOICE

Shree Medicals

At post Sarole Tal-Bhor Dist - Pune

GST No. :

DI. No. : 20-444817, 20C-444819

PH. No. : 7972716060

Email : rs4932581@gmail.com

Patient Name	:	ANJALI VISHWAS JADHAV	**Invoice No.**	:	AM/C150/25/8344
Dr. Name	:	DR.AMIT.J.NIGADE	**Inv. Date**	:	09-06-2025
Patient No.	:		**Pat. Address**	:	

Product	HSN	B.No	Exp.	Qty	Pack	MRP	Gross	Disc	GST	Net
PRI - ALLTAXIM INJ	30049099	24180635	12/26	2.00	1 VIAL	44.75	79.91	0.00	12.00	89.50
Alk - PAN 40 INJ	30049099	24GI02O	08/26	3.00	10 ML	56.60	151.61	0.00	12.00	169.80
INT - ONDET INJ 2ML	300400	ON24080LR	07/26	2.00	2 ML	13.35	23.84	0.00	12.00	26.70
Sur - INTRACATH 22NO	30044030	BH5YRAV	01/27	1.00		242.00	216.07	0.00	12.00	242.00
- SYRINGE 10ML	300400	240K301	10/28	2.00	10 ML	28.00	50.00	0.00	12.00	56.00

Amt. In Words : **FIVE HUNDRED AND EIGHTY-FOUR RUPEES ONLY**
Credit Bal. :**584.00**
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	521.43
DISCOUNT	0.00
TAX	62.57
NET AMT.	**584.00**

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Customer Care : 7972716060

REG. PHARMCIST SIGN
Riyaz Modin Shaikh

Get Well Soon !!!