

	GST TAX INVOICE	GST No. :
	SAI MEDICAL	DI. No. : 20- 427146, 21- 427147
	SHOP NO.1, FIRST FLOOR, VISION CARE CENTER, SUSHILA PARK,MARDHAM ROAD, SHIRUR, PUNE	PH. No. : 8282825959
		Email : thevisioncarecenter@gmail.com

Patient Name : RIYANSH KALE				Invoice No. : AM/C414/26/448						
Dr. Name : DR. SWAPNIL BHALEKAR				Inv. Date : 02-07-2026						
Patient No. : 9657152108				Pat. Address : undefined						

Product	HSN	B.No	Exp.	Qty	Pack	MRP	Gross	Disc	GST	Net
ERPTOL -	30043200	26DD013	03/28	1.00	1 x 1	190.00	180.95	0.00	5.00	190.00
MOXIVISC -	30044030	AHD01A DA	12/26	1.00	1 x 1	175.31	166.96	0.00	5.00	175.31
LOTEL OINTMENT - AJA	30049099	I435	01/28	1.00	1 x 1	217.00	206.67	2.00	5.00	215.00

Amt. In Words : FIVE HUNDRED AND EIGHTY RUPEES AND THREE ONE PAISE ONLY Credit Bal. :580.31 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 554.58 DISCOUNT 2.00 TAX 27.73	
							NET AMT.	580.00

SAI MEDICAL SHOP NO.1, FIRST FLOOR, VISION CARE CENTER, SUSHILA PARK,MARDHAM ROAD, SHIRUR, PUNE Customer Care : 8282825959	Authorized Signatory
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Get Well Soon !!!