PAPERLESS PHARMACY

## GST TAX INVOICE

## SAI MEDICAL

SHOP NO.1, FIRST FLOOR, VISION CARE CENTER, SUSHILA PARK,MARDHAM ROAD, SHIRUR, PUNE

**GST No.** :
**DI. No.** : 20- 427146, 21- 427147
**PH. No.** : 8282825959
**Email** : thevisioncarecenter@gmail.com

| | | | | | |
|---|---|---|---|---|---|
| **Patient Name** | : | KUSUM BASATE | **Invoice No.** | : | AM/C414/26/588 |
| **Dr. Name** | : | DR. SWAPNIL BHALEKAR | **Inv. Date** | : | 03-07-2026 |
| **Patient No.** | : | 9881307599 | **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 |
| SOHA MG - | | FTC0008 | 08/27 | 1.00 | 1 x 1 | 329.00 | 313.33 | 0.00 | 5.00 | 329.00 |

**Amt. In Words** : **FIVE HUNDRED AND NINETEEN RUPEES ONLY**
**Credit Bal.** :**519.00**
**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 | 494.28 |
| DISCOUNT | 0.00 |
| TAX | 24.72 |
| **NET AMT.** | **519.00** |

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**Customer Care : 8282825959**

**Authorized Signatory**

## Get Well Soon !!!