

		GST TAX INVOICE Cyclone Pharmaceuticals Pvt. Ltd. SHOP NO. 2, GROUND FLOOR, SAKET APARTMENT, SOMNATH NAGAR, VADGAON SHERI, NEAR INORBIT MALL, PUNE - 411014				GST No. - 21MHNAN342502 DL No. - MHPZ21-, MHPZ5252 PH. No. - 7711000550 Email - paperlessgmp@gmail.com			
Patient Name	SAGAR SAKHARE			Invoice No.	AM/001/26/83894				
Dr. Name	NA			Inv. Date	06-07-2026				
Patient No.	7711000550			Pat. Address	Pune				
Payment Mode	Cash			Salesman	Prasad Barhate				
Product	HSN	B.No	Exp.	Qty	Pack	MRP	Net		
SMILEE TAB - MID		BN972	12/27	10.00	1 x 10	75.00	70.00		
Total No. of Products :- 1									
Amt. In Words : SEVENTY RUPEES ONLY Credit Bal. : 0.00 Payment Mode : Cash					GROSS		71.43		
					DISCOUNT		5.00		
					TAX		3.57		
					NET AMT.		70.00		
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.						Authorized Signatory Prasad Barhate 			