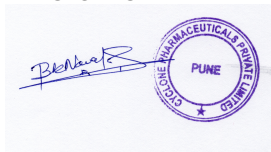


|                                                                                                                                                                                                                                                         |               |                                                                                                                                                                                 |             |                                                                                    |                 |                                                                                                                                             |            |             |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------------------------------------------------------------------------|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------|--|
|                                                                                                                                                                         |               | <b>GST TAX INVOICE</b><br><b>Cyclone Pharmaceuticals Pvt. Ltd.</b><br>SHOP NO. 2, GROUND FLOOR, SAKET APARTMENT, SOMNATH NAGAR, VADGAON SHERI, NEAR INORBIT MALL, PUNE - 411014 |             |                                                                                    |                 | <b>GST No.</b> - 21MHNAN342502<br><b>DL No.</b> - MHPZ21-, MHPZ5252<br><b>PH. No.</b> - 7711000550<br><b>Email</b> - paperlessgmp@gmail.com |            |             |  |
| <b>Patient Name</b>                                                                                                                                                                                                                                     | SAGAR SAKHARE |                                                                                                                                                                                 |             | <b>Invoice No.</b>                                                                 | AM/001/26/83908 |                                                                                                                                             |            |             |  |
| <b>Dr. Name</b>                                                                                                                                                                                                                                         | NA            |                                                                                                                                                                                 |             | <b>Inv. Date</b>                                                                   | 08-07-2026      |                                                                                                                                             |            |             |  |
| <b>Patient No.</b>                                                                                                                                                                                                                                      | 7711000550    |                                                                                                                                                                                 |             | <b>Pat. Address</b>                                                                | Pune            |                                                                                                                                             |            |             |  |
| <b>Payment Mode</b>                                                                                                                                                                                                                                     | Cash          |                                                                                                                                                                                 |             | <b>Salesman</b>                                                                    | SAGAR SAKHARE   |                                                                                                                                             |            |             |  |
| <b>Product</b>                                                                                                                                                                                                                                          | <b>HSN</b>    | <b>B.No</b>                                                                                                                                                                     | <b>Exp.</b> | <b>Qty</b>                                                                         | <b>Pack</b>     | <b>MRP</b>                                                                                                                                  | <b>Net</b> |             |  |
| PARACETAMOL TAB                                                                                                                                                                                                                                         | 30049099      | 3N534DSF                                                                                                                                                                        | 12/28       | 10                                                                                 | 1 x 10          | 9.38                                                                                                                                        | 9.38       |             |  |
| <b>Total No. of Products :- 1</b>                                                                                                                                                                                                                       |               |                                                                                                                                                                                 |             |                                                                                    |                 |                                                                                                                                             |            |             |  |
| <b>Amt. In Words : NINE RUPEES ONLY</b><br><b>Credit Bal. : 0.00</b><br><b>Payment Mode : Cash</b>                                                                                                                                                      |               |                                                                                                                                                                                 |             |                                                                                    |                 | <b>GROSS</b>                                                                                                                                |            | 8.93        |  |
|                                                                                                                                                                                                                                                         |               |                                                                                                                                                                                 |             |                                                                                    |                 | <b>DISCOUNT</b>                                                                                                                             |            | 0.00        |  |
|                                                                                                                                                                                                                                                         |               |                                                                                                                                                                                 |             |                                                                                    |                 | <b>TAX</b>                                                                                                                                  |            | 0.45        |  |
|                                                                                                                                                                                                                                                         |               |                                                                                                                                                                                 |             |                                                                                    |                 | <b>NET AMT.</b>                                                                                                                             |            | <b>9.00</b> |  |
| <b>Terms &amp; Conditions</b><br>1. Medicine return shall be done within 7 days of purchase.<br>2. Cut strips, Refrigerated, OTC/FMCG shall not be refunded/exchanged.<br>3. No return/Exchange will be processed without presenting the original bill. |               |                                                                                                                                                                                 |             |  |                 | <b>Authorized Signatory</b><br><b>SAGAR SAKHARE</b><br>  |            |             |  |
|                                                                                                                                                                                                                                                         |               |                                                                                                                                                                                 |             |                                                                                    |                 |                                                                                                                                             |            |             |  |