GST TAX INVOICE

KRUSHNA MEDICAL AND GENERAL STORES

SHOP NO.06,GROUND FLOOR,GAURAV NIWAS, APARTMENT,PLOT NO.2,KAMGAR NAGAR ROAD, ANANDWALLI SHIWAR, NASHIK

GST No. -
DL No. - 20-565856, 21-565857
PH. No. - 7350507948
Email - nileshdesle73@gmail.com

Patient Name	SHRADHA JAIN	**Invoice No.**	AM/C431/26/55
Dr. Name	dr.shivram hiray	**Inv. Date**	03-07-2026
Patient No.		**Pat. Address**	kamgar nagar
Payment Mode	Cash	**Salesman**	

Product	HSN	B.No	Exp.	Qty	Pack	MRP	Net
FOLVITE - PFI		26007E	09/27	45.00	1 x 45	72.58	72.58
VITCOBIN - 15 TAB	210690	765L001	05/27	4.00	1 x 4	88.00	88.00

Total No. of Products :- 2

Amt. In Words : ONE HUNDRED AND SIXTY-ONE RUPEES ONLY
Credit Bal. : 0.00
Payment Mode : Cash

GROSS	152.93
DISCOUNT	0.00
TAX	7.65
NET AMT.	**161.00**

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