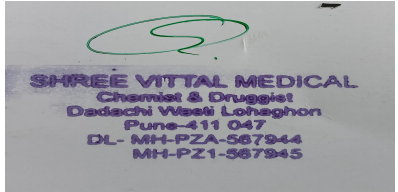


	GST TAX INVOICE SHREE VITTAL MEDICAL SHOP NO.1, GROUND FLOOR, DADACHI WASTI, LOHAGHON WAGHOLI ROAD, LOHAGHON. TAL. HAWELI, DIST. PUNE	GST No. : DI. No. : 20-567944, 21-567945 PH. No. : 9075701889 Email : vijaymane3293@gmail.com
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Patient Name : SANSKAR JADHAV Dr. Name : DR VIJAY MANE Patient No. : 7507199360				Invoice No. : AM/C399/26/110 Inv. Date : 17-06-2026 Pat. Address : lohegaon						
Product	HSN	B.No	Exp.	Qty	Pack	MRP	Gross	Disc	GST	Net
CEFACCLASS -100 DRY SYP -		FHYAC015	04/27	1.00	1 x 1	81.35	72.63	0.00	12.00	81.35
LEVOZET M SYRUP -		AK25016	09/26	1.00	1 x 1	102.28	91.32	0.00	12.00	102.28
ORS INSTA LIQ(ORANGE) 200ML -	3004	AIO60110	06/27	3.00	200 ML	31.50	94.50	0.00	0.00	94.50
GLUCON D ORANGE -		-	08/28	1.00	1 x 1	49.83	44.49	0.00	12.00	49.83
Amt. In Words : THREE HUNDRED AND TWENTY-EIGHT RUPEES ONLY Credit Bal. : 328.00 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 302.94 DISCOUNT 0.00 TAX 25.02 NET AMT. 328.00			
SHREE VITTAL MEDICAL SHOP NO.1, GROUND FLOOR, DADACHI WASTI, LOHAGHON WAGHOLI ROAD, LOHAGHON. TAL. HAWELI, DIST. PUNE Customer Care : 9075701889							Authorized Signatory VIJAY RAGHUNATH MANE 			

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