GST TAX INVOICE

JAY GIRNARI SWASTHA AUSHADHI SEVA

CTS NO. 3180 ,NEAR BUS STAND ,PATIL WADA SHOP NO 1, NASHIRABAD,TAL DIST -JALGAON

GST No. -
DL No. - MH-20-602350, MH-21-602351
PH. No. - 8668268513
Email - dineshbnath@rediffmail.com

Patient Name	SUMAN BAI PATIL	**Invoice No.**	AM/C229/26/158
Dr. Name	NA	**Inv. Date**	04-07-2026
Patient No.	9779827662	**Pat. Address**	NASHIRABAD
Payment Mode	Cash	**Salesman**	DINESH BHIMRAO NATH

Product	HSN	B.No	Exp.	Qty	Pack	MRP	Net
S NUMLO 2.5 - EMC	30049099	EM250860	05/29	15.00	1 x 15	103.50	103.50
HEMPUSHPA 170ML		5942	01/28	1.00	170 ML	260.63	195.47
RANTAC RD CAP - J B	30044030	YCRE25011	06/27	10.00	1 x 10	85.47	79.49
GILLETE GAURD		3945	02/28	1.00	1 x 1	24.92	24.92
CYRA D CAP - SYS		3CD1059	06/27	1.00	1 x 2	47.81	23.91
OKACET 10 - Cip		11218	10/27	10.00	1 x 10	19.73	17.73
CHYMOTHAL FORTE TAB		SN25026	03/27	2.00	1 x 20	429.38	30.06

Total No. of Products :- 7

Amt. In Words : FOUR HUNDRED AND SEVENTY-FIVE RUPEES AND ZERO EIGHT PAISE ONLY
Credit Bal. : 0.00
Payment Mode : Cash

GROSS	512.50
DISCOUNT	85.99
TAX	48.57
NET AMT.	**475.00**

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.

PhonePe
ACCEPTED HERE
Scan & Pay Using PhonePe App

Authorized Signatory
DINESH BHIMRAO NATH