

	GST TAX INVOICE	GST No. :
	SAI MEDICAL	DI. No. : 20- 427146, 21- 427147
	SHOP NO.1, FIRST FLOOR, VISION CARE CENTER, SUSHILA PARK, MARDHAM ROAD, SHIRUR, PUNE	PH. No. : 8282825959
		Email : thevisioncarecenter@gmail.com

Patient Name : WAMAN BARCHATE				Invoice No. : AM/C414/26/280						
Dr. Name : DR. SWAPNIL BHALEKAR				Inv. Date : 30-06-2026						
Patient No. : 9892997205				Pat. Address : undefined						

Product	HSN	B.No	Exp.	Qty	Pack	MRP	Gross	Disc	GST	Net
ERPETOL -		26DB34A	01/28	1.00	1 x 1	173.00	164.76	0.00	5.00	173.00
AQUIM PF 10ML -		26DE016	01/28	1.00		700.00	666.67	0.00	5.00	700.00
ZOSTER 400 DT - LEE	30049099	ZDT501F	05/27	24.00	1 x 10	145.60	332.80	0.00	5.00	349.44
NEPABLU BF -	30049099	003J25C E	03/27	1.00	1 x 1	286.50	272.86	0.00	5.00	286.50
AQUIM LIDWIPES -	30059090	PLPHA2. 103	05/28	3.00	1 x 10	188.00	53.71	45.00	5.00	11.40

Amt. In Words : ONE THOUSAND, FIVE HUNDRED AND TWENTY RUPEES AND THREE FOUR PAISE ONLY Credit Bal. :1,520.34 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		1,490.80
							DISCOUNT		45.00
							TAX		74.54
							NET AMT.		1,520.00

SAI MEDICAL SHOP NO.1, FIRST FLOOR, VISION CARE CENTER, SUSHILA PARK, MARDHAM ROAD, SHIRUR, PUNE Customer Care : 8282825959	Authorized Signatory
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Get Well Soon !!!