

Bill No : 22329
Date / Time : 22-12-2023
Patient Name : Ganapathy Amma
Contact No : +91
Doctor Name : Dr A Ashraf
Customer Name :
Customer GSTIN :



ASWAS COMMUNITY PHARMACY
AFF.PHARMACIST~S WELFARE SOCIETY
REG.NO.T3036.07
AP10.493 NEAR PUBLIC
MARKET,ALUMOODU,KANIYAPURAM

Branch : ALUMOODU
Tel No : 9061097470
DL No : KL-TVM 133127
DL No : KL-TVM 133128
GSTIN : 32ABLFA5112D1Z3
Division : ALUMOODU

SL NO	HSN CODE	PRODUCT NAME	MFR	BATCH	EXP DT	QTY	MRP	DISC %	RATE	GST %	AMOUNT
1	45784125	Augmentin Duo 625 Tab.	GLAX	078	02/25	9	20.49	15	17.41	12	156.71
2	45784125	KETOFORD 10MG	LEEF	303G	06/25	9	6.00	15	5.10	12	45.90
3	45784125	Metrogyl Tab. 400mg	J.B	TMB23195	05/27	6	1.70	15	1.45	12	8.68
4	45784125	Pantakind 40mg Tab	MANK	G95W016	07/25	3	4.68	15	3.97	12	11.92
5	45784125	Rancil 10mg	RANB	0934	02/25	10	11.90	15	10.12	12	101.15

FSSAI NO : 9022119922 TOTAL 37 381.60

Taxable Amount :290.00 SGST : 17.00 CGST : 17.00 IGST : 0.00 Non Taxable Amount : 0.00

Three Hundreds Twenty Four **Grand Total 324.36**

You have saved : Rs 57.24

Note

1. Reverse tax mechanism on items are not applicable. Exchange within 7 days from the date of purchase original bill mandatory for exchange of products

Items requiring cold storage will not be returned or exchanged

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payment QR

For Pharmacist